

17-25 BATES STREET

SHAW-WALKER

Full cut #920R - Half cut #620R - Third cut #020R - Full cut #9205R

**CERTIFICATE OF APPROVAL  
FOR INTERNAL PLUMBING**

THE TOWN/CITY OF Portland  
**50001 IC**

TOWN/CITY CODE 05170 LPI NUMBER 00123 DATE ISSUED 10 18 80  
Month Day Year

Installer's Name RAYMOND F.I. M.I. R Installer Code  1. Owner  
 2. Licensed Master Plumber  
 3. Licensed Oil Burnerman  
 4. Employee of Public Utility  
 5. Manufactured Housing Dealer  
 6. Manufactured Housing Mechanic  
 7. Limited License

Owner HAYLAND CARR Subdivision \_\_\_\_\_  
Address 19-21 BATES ST. Street, Road Name  
St./Lot Number (Location where plumbing was done and inspected)

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING RULES.

Signature of LPI [Signature]  
Date Inspected JAN 6 1981

**TOWN'S COPY**

**INTERNAL PLUMBING PERMIT FOR THE TOWN/CITY OF**

THE TOWN/CITY OF Portland  
**50001 IP**

Town/City Code 05170 LPI Number 00123 Date Issued 10 18 80 License No. \_\_\_\_\_  
Month Day Year

Address of Where Plumbing is Done 19-21 BATES ST. Subdivision \_\_\_\_\_  
St./Lot Number Street/Road Name

Name of Owner RAYMOND W. WELLS F.I. M.I. 541 Mailing Address Portland Zip Code \_\_\_\_\_  
Last Name

Type of Construction: 1. New  2. Remodeling  3. Addition  4. Remodelling & Addition  5. Replacement of Hot Water Heater  6. Hook-up of Mobile Home  7. Other (Specify)

Plumbing To Serve: 1. Single (Res)  2. Multi-Fam(Res)  3. Mobile Home  4. Modular Home  5. Commercial  6. School

Number of Fixtures or Hook-Ups: Sink(s) 2 Toilet(s) 2 Bathtub(s) 2 Lavatorie(s) 2 Shower(s)  Urinal(s)   
Clothes Washer(s)  Dish Washer(s)  Hot Water Heater(s) 2 Floor Drain(s)  Hook-Up(s) 17

Fixture Fee 39.00  
Hook-Up Fee 00.00  
Total Fee 39.00  
If Double Fee Check Box

**IMPORTANT: Note the following conditions.**  
1. This Permit is non-transferable to another person or party.  
2. If construction has not started within 6 months from the Date of Issue, this Permit becomes invalid.

Dept. of Human Services  
Div. of Health Engineering

Signature of LPI \_\_\_\_\_

CERTIFICATE OF APPROVAL  
FOR INTERNAL PLUMBING

THE TOWN/CITY OF Portland  
50001 IC

TOWN/CITY CODE 05150 LPI NUMBER 00123 DATE ISSUED 10 8 80  
Month Day Year

Certificate of App. Number

Installer's Name RAYMOND F.I. M.I. R

- Installer Code  1. Owner  
2. Licensed Master Plumber  
3. Licensed Oil Burnerman  
4. Employee of Public Utility  
5. Manufactured Housing Dealer  
6. Manufactured Housing Mechanic  
7. Limited License

Owner HOWLAND CORP  
Address 19-21 BATE ST.  
St./Lot Number Street, Road Name Subdivision  
(Location where plumbing was done and inspected)

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING RULES.

OWNER'S COPY

Signature of LPI [Signature]  
Date Inspected JAN 6 1981



**APPLICATION FOR PERMIT**  
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES  
 ELECTRICAL INSTALLATIONS

Date Sept. 25, 1989  
 Receipt and Permit number A51737

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: 21-23 Bates St,  
 OWNER'S NAME: Howland Corp. ADDRESS: \_\_\_\_\_

|                                   |                                                                        |                        |                             |                          |   |                 |       |
|-----------------------------------|------------------------------------------------------------------------|------------------------|-----------------------------|--------------------------|---|-----------------|-------|
| OUTLETS:                          | Receptacles _____                                                      | Switches _____         | Plugmold _____              | #t. TOTAL <u>50</u>      | ✓ | FEES            |       |
| FIXTURES: (number of)             | Incandescent <u>10</u>                                                 | Flourescent _____      | (not strip) TOTAL <u>10</u> | ✓                        |   | 5.00            |       |
|                                   | Strip Flourescent _____                                                | ft. _____              |                             |                          |   | 3.00            |       |
| SERVICES:                         | Overhead _____                                                         | Underground _____      | Temporary _____             | TOTAL amperes <u>400</u> | ✓ | 6.00            |       |
| METERS: (number of)               |                                                                        |                        |                             |                          |   | 1.00            |       |
| MOTORS: (number of)               |                                                                        |                        |                             |                          |   |                 |       |
|                                   | Fractional _____                                                       |                        |                             |                          |   |                 |       |
|                                   | 1 HP or over _____                                                     |                        |                             |                          |   |                 |       |
| RESIDENTIAL HEATING:              | Oil or Gas (number of units) _____                                     |                        |                             |                          |   |                 |       |
|                                   | Electric (number of rooms) <u>10</u>                                   |                        |                             |                          |   | ✓               | 10.00 |
| 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 <u>2</u>                                                        | Water Heaters <u>2</u> |                             |                          |   | ✓               | 12.00 |
|                                   | Cook Tops _____                                                        | Disposals <u>2</u>     |                             |                          |   |                 |       |
|                                   | Wall Ovens _____                                                       | Dishwashers _____      |                             |                          |   |                 |       |
|                                   | Dryers <u>2</u>                                                        | Compactors _____       |                             |                          |   |                 |       |
|                                   | Fans _____                                                             | Others (denote) _____  |                             |                          |   |                 |       |
|                                   | TOTAL _____                                                            |                        |                             |                          |   | <del>2x00</del> |       |
| MISCELLANEOUS: (number of)        | Branch Panels _____                                                    |                        |                             |                          |   |                 |       |
|                                   | Transformers _____                                                     |                        |                             |                          |   |                 |       |
|                                   | Air Conditioners Central Unit _____                                    |                        |                             |                          |   |                 |       |
|                                   | Separate Units (windows) _____                                         |                        |                             |                          |   |                 |       |
|                                   | Signs 20 sq. ft. and under _____                                       |                        |                             |                          |   |                 |       |
|                                   | Ove. 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, Fairs, etc. _____                                              |                        |                             |                          |   |                 |       |
|                                   | Alterations to wires _____                                             |                        |                             |                          |   |                 |       |
|                                   | Repairs after fire _____                                               |                        |                             |                          |   |                 |       |
|                                   | Emergency Lights, battery _____                                        |                        |                             |                          |   |                 |       |
|                                   | Emergency Generators _____                                             |                        |                             |                          |   |                 |       |

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... INSTALLATION FEE DUE: 37.00  
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) ..... DOUBLE FEE DUE: \_\_\_\_\_  
 TOTAL AMOUNT DUE: 37.00

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_; or Will Call x  
 CONTRACTOR'S NAME: Lightening Elec.  
 ADDRESS: 178 Westbrook St. So. Portland  
 TEL.: 883-5198 774-3116  
 MASTER LICENSE NO.: 3507 SIGNATURE OF CONTRACTOR: M. J. Levent  
 LIMITED LICENSE NO.: \_\_\_\_\_

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



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

Issued to **Howland Corporation**

LOCATION

**23 Bates Street**

Date of Issue **Jan. 12, 1981**

This is to certify that the building, premises, or part thereof, at the above location, built—altered—changed as to use under Building Permit No. **80/650**, 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

**Entire**

APPROVED OCCUPANCY

Limiting Conditions:

**2 Family Duplex**

This certificate supersedes certificate issued

Approved:

1-12-81  
(Date)

[Signature]  
Inspector

[Signature]  
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 licensee for one dollar.



# APPLICATION FOR PERMIT

## PERMIT ISSUED

AUG 19 1980

CITY OF PORTLAND

B.O.C.A. USE GROUP .....

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

00-650

ZONING LOCATION R-1 PORTLAND, MAINE, Aug. 14, 1980

To the DIRECTOR 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 .... 23 Bates Street

1. Owner's name and address ... Howland Corp. - 541 Riverside St. Fire District #1  #2

2. Lessee's name and address .....

3. Contractor's name and address ... Owner Telephone 797-5900

4. Architect .....

Proposed use of building .. duplex dwelling Specifications Plans Telephone 04103 Telephone .....

Material use .....

Material .....

No. stories .. Heat .. No. of sheets ..

Other buildings on same lot .. Style of roof .. No. families .. 2

Estimated contractual cost \$ 36,000 .. Roofing .. No. families ..

FIELD INSPECTOR—Mr. .. Fee \$ 163.00

FIELD INSPECTOR—Mr.

This application is for:

Dwelling .. @ 775-5451

Garage .. Ext. 234

Masonry Bldg. ....

Metal Bldg. ....

Alterations .....

Demolitions .....

Change of Use .....

Other .....

### GENERAL DESCRIPTION

To construct 1 story, side by side duplex as per plans. 6 sheets of plans no garages. 24 x 54

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO  1  2  3  4  Other: .....

### DETAILS OF NEW WORK

Is any plumbing involved in this work? ...  Yes .....

Is any electrical work involved in this work? ...  Yes .....

Has connection to be made to public sewer? ...  Yes .....

Has septic tank notice been sent? .....

Height average grade to top of plate .. 24 .. 10 ft. .. If not, what is proposed for sewage? .....

Size, front .. 54 .. depth .. 24 .. No. stories .. 1 .. Form notice sent? .....

Material of foundation .. concrete .. Thickness, top 10 in bottom 10 inellar .. crawl space .. earth

Kind of roof .. pitch .. Roof covering .. asphalt shingles .. Kind of heat .. elec .. fuel

No. of chimneys .. none .. Material of chimneys .. Dressed or full size? .. Corner posts .. 4 x 6 .. Sills .. 2 x 6

Framing Lumber—Kind .. constr .. Grade .. Size .. Max. on centers ..

Size Girder .. .. Columns under girders .. ..

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet. ..

Joists and rafters: .. .. Size .. .. Max. on centers ..

On centers: .. 1st floor .. 2 x 8 .. 2nd .. 3rd .. roof .. 2' 0" on ctr.

Maximum span: .. 1st floor .. 16 .. 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 accommodatd ...

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? .....

APPROVALS BY:

BUILDING INSPECTION—PLAN EXAMINER .....

ZONING: OK Made! 5/11/80 .....

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 the etc are observed? ...  Yes

Signature of Applicant .. Scott Howland .. Phone # .. SA ME ..

Type Name of above .. Scott Howland ..

Howland Corp. ..

FIELD INSPECTOR'S COPY

Other ..  1  2  3  4

and Address .....

**CERTIFICATE OF APPROVAL  
FOR INTERNAL PLUMBING**

THE TOWN/CITY OF Roswell

TOWN/CITY CODE 05170 LPI NUMBER 1123 DATE ISSUED 12 14 79  
Month Day Year

No **36842 IC**  
Certificate of App. Number

Installer's Name MAQUETTE, JERRY F.I.M.I.     

- Installer Code  2
- 1. Owner
  - 2. Licensed Master Plumber
  - 3. Licensed Oil Burnerman
  - 4. Employees of Public Utilities
  - 5. Manufactured Housing Dealer
  - 6. Manufactured Housing Mechanic

Owner Howland Corp.

Address 27 BATES ST.  
St./Lot Number Street, Road Name Subdivision  
(Location where plumbing was done and inspected)

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING REGULATIONS.

*Ernest J. Godwin*  
Signature of LPI

Date Inspected DEC 14 1979

ORIGINAL—To be sent to: Department of Human Services,  
Division of Health  
Engineering, Augusta, Maine 04333

TOWN'S COPY

**INTERNAL PLUMBING PERMIT FOR THE TOWN/CITY OF** Roswell

Town/City Code 05170 LPI Number 1123 Date Issued 12 15 79 INSTALLER'S License No. 11798

No **36842 IP**  
PERMIT NUMBER

Address of Where Plumbing is Done 27 BATES ST. St./Lot Number Street/Road Name Subdivision

- Installer Code  2
- 1. Owner
  - 2. Licensed Master Plumber
  - 3. Licensed Oil Burnerman
  - 4. Employees of Public Utilities
  - 5. Manufactured Housing Dealer
  - 6. Manufactured Housing Mech

Name of Owner HOWLAND CORP. Last Name F.I. M.I. Mailing Address 541 RIVER SIDE ST. Zip Code

Type of Construction: 1. New  2. Remodeling  3. Addition  4. Remodeling & Addition  5. Replacement of Hot Water Heater  6. Hook-up of Mobile Home  7. Hook-up of Modular Home  8. Other (Specify)

Plumbing To Serve: 1. Single (Res)  2. Multi-Fam (Res)  3. Mobile Home  4. Modular Home  5. Commercial  6. School  7. Other (Specify)

Number of Fixtures or Hook-Ups: Sink(s)  2 Toilet(s)  2 Bathtub(s)  2 Lavatory(s)  2 Shower(s)  Urinal(s)   
Clothes Washer(s)  Dish-Washer(s)  Hot Water Heater(s)  2 Floor Drain(s)  Hook-Up(s)  Dishwasher  2

This "Internal Plumbing Permit" is invalid if work is not commenced within six(6) months from date of issuance. Upon completion of work a "Certificate of Approval" must be obtained from the LPI.

**SCHEDULE OF "FEES"**

1-10 Fixtures DEC 6.00 each 1979  
11-20 Fixtures \$1.00 each  
21 Fixtures on up \$.63 each  
Hook-Ups \$2.00 each

Fixture Fee 12.00  
Hook-Up Fee 00  
Administrative Fee 3.00  
Total Fee 15.00

NOTE: Hotwater Heater (Tank or Tankless) is a Fixture!

If Double Fee Check Box

TOWN'S COPY

Signature of LPI

CERTIFICATE OF APPROVAL  
FOR INTERNAL PLUMBING

THE TOWN/CITY OF Wentworth

No. 36842 IC

Certificate of App. Number

TOWN/CITY CODE  
05170

LPI NUMBER  
1123

DATE ISSUED  
Month 12 Day 15 Year 79

Installer's Name

PAQUETTE TERRY F.I. M.I.

Installer Code

- 1. Owner
- 2. Licensed Master Plumber
- 3. Licensed Oil Burner
- 4. Employees of Public Utilities
- 5. Manufactured Housing Dealer
- 6. Manufactured Housing Mechanic

Owner

HAWLAND CORP.

Subdivision

Address

27 BATES ST.  
Street, Road Name

SI./Lot Number (Location where plumbing was done and inspected)

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING REGULATIONS.

Carol R. Gosselin

Signature of LPI

DEC 14 1979

Date Inspected

ORIGINAL - To be sent to: Department of Human Services,  
Division of Health  
Engineering, Augusta, Maine 04333

OWNER'S COPY





**APPLICATION FOR PERMIT**  
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES  
 ELECTRICAL INSTALLATIONS

Date Oct. 29, 19 79  
 Receipt and Permit number A 34903

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: 23-27 Bates Street  
 OWNER'S NAME: Downeast Dwellings ADDRESS: 22 Glenwood Ave. Gorham, Me.

|                                   |  |                                                |                   |                 |       |             |       |               |             |      |
|-----------------------------------|--|------------------------------------------------|-------------------|-----------------|-------|-------------|-------|---------------|-------------|------|
| OUTLETS:                          |  | RECEPTACLES                                    | _____             | SWITCHES        | _____ | PLUGMOLD    | _____ | ft. TOTAL     | <u>1-30</u> | 3.00 |
| FIXTURES: (number of)             |  |                                                |                   |                 |       |             |       |               |             |      |
|                                   |  | INCANDESCENT                                   | _____             | FLUORESCENT     | _____ | (not strip) | TOTAL | _____         |             |      |
|                                   |  | Strip Fluorescent                              | _____             | ft.             |       |             |       |               |             |      |
| SERVICES:                         |  |                                                |                   |                 |       |             |       |               |             |      |
|                                   |  | Overhead                                       | <u>xx</u>         | Underground     | _____ | Temporary   | _____ | TOTAL amperes | <u>200</u>  | 3.00 |
| METERS: (number of)               |  | <u>1</u> ..... .50                             |                   |                 |       |             |       |               |             |      |
| 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                                         | _____             | Water Heaters   | _____ | <u>2</u>    |       |               |             |      |
|                                   |  | Cook Tops                                      | _____             | Disposals       | _____ |             |       |               |             |      |
|                                   |  | Wall Ovens                                     | _____             | Dishwashers     | _____ |             |       |               |             |      |
|                                   |  | Dryers                                         | _____             | Compactors      | _____ |             |       |               |             |      |
|                                   |  | Fans                                           | _____             | Others (denote) | _____ |             |       |               |             |      |
|                                   |  | TOTAL                                          |                   |                 |       |             |       |               |             | 3.00 |
| MISCELLANEOUS: (number of)        |  |                                                |                   |                 |       |             |       |               |             |      |
|                                   |  | Branch 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: 9.50

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_\_\_; or Will Call xx  
 CONTRACTOR'S NAME: Donald Pinkham  
 ADDRESS: 130 South St. Gorham  
 TEL.: 839-4802  
 MASTER LICENSE NO.: 2552 SIGNATURE OF CONTRACTOR: Donald Pinkham  
 LIMITED LICENSE NO.: \_\_\_\_\_

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



**APPLICATION FOR PERMIT**  
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES  
 ELECTRICAL INSTALLATIONS

Date Sept. 26, 19 79  
 Receipt and Permit number A34790

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: 27 Bates St.  
 OWNER'S NAME: Howland Corp ADDRESS: 541 Riverside St.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | FEES  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| OUTLETS:<br>Receptacles <u>10</u> Switches <u>10</u> Plugmold _____ ft. TOTAL <u>30</u> ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 3.00  |
| FIXTURES: (number of)<br>Incandescent <u>10</u> Fluorescent _____ (not strip) TOTAL <u>10</u> ✓<br>Strip Fluorescent _____ ft. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 3.00  |
| SERVICES:<br>Overhead <u>200</u> Underground _____ Temporary _____ TOTAL amperes <u>200</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3.00  |
| METERS: (number of) <u>1</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | .50   |
| MOTORS: (number of)<br>Fractional _____<br>1 HP or over _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |       |
| RESIDENTIAL HEATING:<br>Oil or Gas (number of units) _____<br>Electric (number of rooms) _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |
| COMMERCIAL OR INDUSTRIAL HEATING:<br>Oil or Gas (by a main boiler) _____<br>Oil or Gas (by separate units) _____<br>Electric Under 20 kws _____ Over 20 kws _____                                                                                                                                                                                                                                                                                                                                                                                                                          |       |
| APPLIANCES: (number of)<br>Ranges _____ Water Heaters _____<br>Cook Tops _____ Disposals _____<br>Wall Ovens _____ Dishwashers <u>2</u><br>Dryers <u>2</u> Compactors _____<br>Fans _____ Others (denote) _____                                                                                                                                                                                                                                                                                                                                                                            |       |
| TOTAL _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 6.00  |
| MISCELLANEOUS: (number of)<br>Branch Panels _____<br>Transformers _____<br>Air Conditioners Central Unit _____<br>Separate Units (windows) _____<br>Signs 20 sq. ft. and under _____<br>Over 20 sq. ft. _____<br>Swimming Pools Above Ground _____<br>In Ground _____<br>Fire/Burglar Alarms Residential _____<br>Commercial _____<br>Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____<br>over 30 amps _____<br>Circus, Fairs, etc. _____<br>Alterations to wires _____<br>Repairs after fire _____<br>Emergency Lights, battery _____<br>Emergency Generators _____ |       |
| FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 15.50 |
| FOR REMOVAL OF A "STOP ORDER" (304-16.b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 15.50 |
| TOTAL AMOUNT DUE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 15.50 |

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_; or Will Call  x  
 CONTRACTOR'S NAME: Don Pinkham  
 ADDRESS: 130 South St., Gorham  
 TEL.: 839-4802  
 MASTER LICENSE NO.: 02552  
 LIMITED LICENSE NO.: \_\_\_\_\_

SIGNATURE OF CONTRACTOR:  
*Don Pinkham*

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

CITY OF PORTLAND, MAINE  
Department of Building Inspection



# Certificate of Occupancy

LOCATION 23-27 Eates Street  
Date of Issue Dec. 4, 1979

Issued to Howland Homes

This is to certify that the building, premises, or part thereof, at the above location, built—altered—changed as to use under Building Permit No. 79/852, 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

2 Family Duplex

Entire

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

12/4/79

(Date)

Inspector

*Walter D. ...*  
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.



# APPLICATION FOR PERMIT

## PERMIT ISSUED

B.O.C.A. USE GROUP .....  
B.O.C.A. TYPE OF CONSTRUCTION ..... 000852

SEP 27 1979

ZONING LOCATION ..... PORTLAND, MAINE, Sept. 26, 1979

CITY of PORTLAND

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or fall 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 23-27 Bates Street (429-5-11)

1. Owner's name and address .. Howland Corp - 541 Riverside St. .... Fire District #1  #2

2. Lessee's name and address ..... Telephone .. 797-5900

3. Contractor's name and address .. Downeast Dwellings, Inc. - 22 Glenwood Ave. .... Telephone .. 839-5963

4. Architect ..... Specifications ..... Parham 04038 No. of sheets .....

Proposed use of building .. 2 family - duplex

Last use .....

Material .. No. stories .. Heat .. Style of roof .. Roofing ..

Other buildings on same lot .....

Estimated contractural cost \$ .. 39,000 .. Fee \$ .. 176.50

FIELD INSPECTOR - Mr. ....

### GENERAL DESCRIPTION

This application is for:

- Dwelling .....
- Garage .....
- Masonry Bldg. ....
- Metal Bldg. ....
- Alterations .....
- Demolitions .....
- Change of Use .....
- Other .....

To construct 24'x54' two family dwelling as per plan

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1  2  3  4

Other: .....

### DETAILS OF NEW WORK

Is any plumbing involved in this work? .. yes

Is connection to be made to public sewer? .. yes

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

Height average grade to top of plate .. 8' .. Height average grade to highest point of roof .. 12'

Size, front .. 54' .. depth .. 24' .. No. stories .. 1 .. solid or filled land? .. earth or rock? ..

Material of foundation .. cement .. Thickness, top .. 10" .. bottom .. cellar .. yes

Kind of roof .. pitch .. Rise per foot .. 3/12 .. Roof covering .. asphalt shingles

No. of chimneys .. 0 .. Material of chimneys .. of lining .. Kind of heat .. elec .. fuel ..

Framing Lumber—Kind .. spruce .. Dressed or full size? .. Corner posts .. 4x4 .. Sills .. 2x6

Size Girder .. 6x8 .. Columns under girders .. 1x11 .. Size .. 3x .. Max. on centers .. 8'

Joists (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 .. 3rd .. roof .. 3x4 truss

On centers: 1st floor .. 2nd .. 3rd .. roof .. continental Home

Maximum span: 1st floor .. 2nd .. 3rd .. roof .. of New Eng.

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 repair 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

Type Name of above .. Jpe Mottershead

Phone # 839 5963

1  2  3  4

Other .. and Address ..

FIELD INSPECTOR'S COPY

X

NOTES

Check for sound proofing between units  
Oct 9/79 Foundation placed

Oct 17/79 Units placed on the  
foundation. No basement  
drainage - gravel & drain  
tile have been placed.

Oct 23/79 Attout completed

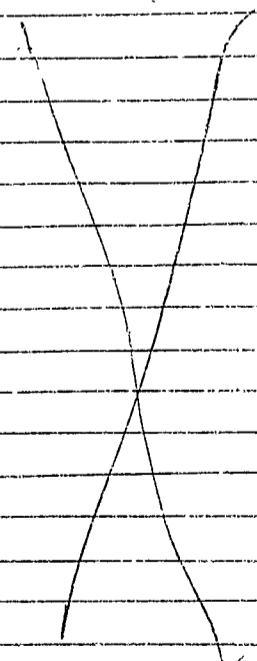
Nov 14/79 No one working building  
secured.

Dec 3/79 Final Insp.

City to issue the C.O. for  
the entire 2 floor building.

Permit No. 991852  
Location 27 Westley St  
Owner All Island Corp  
Date of permit 9-26-79  
Approved 9-27-79

564



of Portland with plans and specifications, if any, submitted herewith and the following specifications: (429-1-6) Bates. St. 23-27 street no. 541 Riverside St.

1. Owner's name and address The Howland Corp. - 541 Riverside St. Fire District #1  #2

2. Lessee's name and address Telephone 797-5900

3. Contractor's name and address same Telephone

4. Architect Telephone

Proposed use of building Foundation only Specifications Plans Telephone

Last use No. stories Heat No. of sheets

Material No. families

\* Other buildings on same lot No. families

Estimated contractual cost \$ Style of roof Roofing

Fee \$ 15.00

FIELD INSPECTOR—Mr.

- This application is for:
  - Dwelling
  - Garage
  - Masonry Bldg.
  - Metal Bldg.
  - Alterations
  - Demolitions
  - Change of Use
  - Center

@ 775-5451 Ext. 234

GENERAL DESCRIPTION

Foundation only 24x54 frost wall.

Continental Homes coming in for building permit for duplex.

The Howland Corp. is General Contractor

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1  2  3  4  Other: .....

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 Thickness, top bottom earth or rock?

Material of foundation Rise per foot Roof covering cellar

Kind of roof Material of chimneys of lining Kind of heat fuel

No. of chimneys Dressed or full size? Size Corner posts Sills

Framing Lumber—Kind Columns under girders Max. on centers

Size Girder 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 DATE

ZONING: .....

BUILDING CODE: .....

Fire Dept.: .....

Health Dept.: .....

Others: .....

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? .....

Signature of Applicant *Scott Howland* Phone # .....

Type Name of above Scott Howland Other  1  2  3  4

and Address .....

FIELD INSPECTOR'S COPY



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP 000800

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION PORTLAND, MAINE, 9-10-79

SEP 12 1979

000800

CITY OF PORTLAND

To the DIRECTOR 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 (429-115) Bates, St. 23-27 street no. Fire District #1 [ ] #2 [ ]
1. Owner's name and address The Howland Corp. - 541 Riverside St. Telephone: 797-5900
2. Lessee's name and address
3. Contractor's name and address same Telephone
4. Architect Specifications Plans No. of sheets
Proposed use of building Foundation only 24x54 frost wall No. families
Last use No. families
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$ Fee \$ 15.00

FIELD INSPECTOR-Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451 Foundation only 24x54 frost wall.
Dwelling Ext. 234 Continental Homes coming in for building permit for duplex.
Garage Stamp of Special Conditions
Masonry Bldg. The Howland Corp. is General Contractor
Metal Bldg.
Alterations
Demolitions
Change of Use
Other

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 [x] 2 [ ] 3 [ ] 4 [ ]
Other:

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 MISCELLANEOUS
BUILDING INSPECTION-PLAN EXAMINER Will work require disturbing of any tree on a public street?
ZONING:
BUILDING CODE: Will there be in charge of the above work a person competent
Fire Dept.: to see that the State and City requirements pertaining thereto
Health Dept.: are observed?
Others:

Signature of Applicant Scott Howland Phone #
Type Name of above Scott Howland 1 [x] 2 [ ] 3 [ ] 4 [ ]
Other and Address

FIELD INSPECTOR'S COPY

**CERTIFICATE OF APPROVAL**

FOR INTERNAL PLUMBING FOR THE TOWN/CITY OF \_\_\_\_\_

OWNER \_\_\_\_\_

Cert. of App. Number

**No. 7463 1C**

ADDRESS \_\_\_\_\_, MAINE  
Location where plumbing was done and inspected

Date C.O.A. Issued

|       |     |      |
|-------|-----|------|
|       |     |      |
| Month | Day | Year |

Plumbing Installed by WILLIAM CARR

Date Inspected

|       |     |      |
|-------|-----|------|
|       |     |      |
| Month | Day | Year |

Date Permit Issued

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING REGULATIONS.

Signature of LPI \_\_\_\_\_

State Office  
Use Only  
Date Received

ORIGINAL—To be sent to: Department of Human Services  
Division of Health Engineering 221 State Street Augusta, Maine 04333

**INTERNAL PLUMBING PERMIT FOR THE TOWN/CITY OF Woolland**

Town/City Code 057710 LPI Number 1123 License Number 606 Date Issued 18 23 75 PERMIT NUMBER **No. 7463 1P**

Address of where Plumbing is done 197 BATES ST St. Rd. Av/Lot \_\_\_\_\_  
Name of Owner W. Carr F.I. M.I. \_\_\_\_\_ Mailing Address 31 BATES STREET Zip Code \_\_\_\_\_

Type of Construction: 1. New, 2. Remodeling, 3. Addition, 4. Remodeling & Addition, 5. Replacement of Hot Water Heater, 6. Hook-up of Mobile Home, 7. Minor Change, 8. Other (Specify) 7

Plumbing to Serve: 1. Single (Res), 2. Multi-Fam (Res), 3. Mobile Home, 4. Mobile Home without Seal, 5. Commercial, 6. School, 7. Other (Specify) 2

**SCHEDULE OF "FEES"**  
(See Sect. 1.12 of the Part I Code)

| Fixture    | # | Fixture         | # | Fixture           | # |
|------------|---|-----------------|---|-------------------|---|
| Sinks      | 1 | Showers         | 1 | Hot Water Heaters | 1 |
| Toilets    | 1 | Urinals         | 1 | Floor Drains      | 1 |
| Bathtubs   | 1 | Clothes Washers | 1 | Other             | 1 |
| Lavatories | 1 | Dish Washers    | 1 | Hook-ups          | 1 |

1-10 Fixtures \$2.00 each  
11-20 Fixtures \$1.00 each  
21 Fixtures on up \$ .50 each  
Hook-ups \$2.00 each  
Note: Hotwater Heater (tank or tankless) is considered a fixture

| Quantity          | Fee         |
|-------------------|-------------|
| Fixtures <u>4</u> | <u>8.00</u> |
| Hook-ups          |             |

Administrative fee 3 0 0

Total or Double Fee 11.00

Double Fee 1. Yes

Date Received \_\_\_\_\_ Receipt Number \_\_\_\_\_ Money Received \_\_\_\_\_  
STATE OFFICE USE ONLY Administrative Code

Signature of LPI \_\_\_\_\_

This "Internal Plumbing Permit" is invalid if work is not commenced within six(6) months from date of issuance. Upon completion of work a "Certificate of Approval" must be obtained.  
Original--To be sent to: Department of Human Services, Division of Health Engineering 221 State Street, Augusta, Maine 04333

HHE-211 377





# APPLICATION FOR PERMIT

## PERMIT ISSUED

B.O.C.A. USE GROUP .....  
 B.O.C.A. TYPE OF CONSTRUCTION .....  
 ZONING LOCATION ..... PORTLAND, MAINE, Dec. 28, 1973 .....  
 CITY OF PORTLAND

01463 DEC 27 1973

To the DIRECTOR 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 31 Bates St Fire District #1 , #2   
 1. Owner's name and address Charles Forsyth, same Telephone .....  
 2. Lessee's name and address ..... Telephone .....  
 3. Contractor's name and address Michael Roof, 22 Blanchard Rd, Cumberland Ct Telephone 8295791  
 4. Architect ..... Specifications ..... Plans ..... No. of sheets .....  
 Proposed use of building dwelling No. families .....  
 Last use same No. families .....  
 Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....  
 Other buildings on same lot ..... Fee \$ 5.00  
 Estimated contractual cost \$ 800.00

FIELD INSPECTOR—Mr. Hoffses GENERAL DESCRIPTION  
 This application is for: @ 775-5451 to enclose porch per plan, majority glazed.  
 Dwelling ~~xx~~ Ext. 234  
 Garage .....  
 Masonry Bldg. .... Stamp of Special Conditions  
 Metal Bldg. ....  
 Alterations porch .....  
 Demolitions .....  
 Change of Use .....  
 Other .....

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1  2  3  4

### DETAILS OF NEW WORK

Is any plumbing involved in this work? <sup>no</sup>  Is any electrical work involved in this work? <sup>no</sup>   
 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 MISCELLANEOUS  
 BUILDING INSPECTION—PLAN EXAMINER ..... Will work require disturbing of any tree on a public street? ..  
 ZONING: .....  
 BUILDING CODE: ..... Will there be in charge of the above work a person competent  
 Fire Dept.: ..... to see that the State and City requirements pertaining thereto  
 Health Dept.: ..... are observed? .. yes ..  
 Others: .....

OK'd by *Mr Brown* Signature of Applicant *Michael D. Roof* Phone # 829-5791  
 Type Name of above ..... 1  2  3  4   
 Other .....  
 and Address .....

FIELD INSPECTOR'S COPY

CITY OF PORTLAND, MAINE  
Memorandum

March 23, 1967

To: Vincent R. Dahlfred, Director of Economic Development  
Gerald E. Mayberry, Director of Building Inspection Services  
Alfred Lucci, City Assessor  
Karl F. Switzer, Director of Parks and Recreation  
Thomas F. Griffin, Jr., Director of Public Works  
Dr. John Davy, Director of Health Department  
Barnett I. Shur, Corporation Counsel

From: Wm. Bruce Dalton, Planning Director

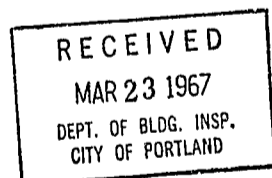
Subject: Request for Change of Zone from R-5 to B-2 - 17-27 Bates Street  
Daniel C. McDonald

Mr. Daniel C. McDonald is requesting that the area between 17-27 Bates Street be rezoned from R-5 to B-2. This property is listed on the Assessors' records as Chart 429-Block J-Lot 6. The lot is about 140 feet x 145 feet.

This land is presently vacant, and there are no restrictions in the original deed concerning improvements and class of uses permitted. Mr. McDonald is planning to build a structure for a medical clinic, offices, and other similar uses. Based upon the contemplated uses, it appears that this area might alternatively be considered for designation as a Residence-Professional Zone. However, the size of the lot may limit the amount of space for off-street parking.

If an R-P Zone designation were to be recommended, the area southwesterly toward Baxter Boulevard would possibly be included in such a recommendation. It is believed that this zone would lend itself more appropriately to this area which abuts residential properties and that located nearer Baxter Boulevard on Bates Street.

Any thoughts or comments your Department may have regarding this proposed change of zone would be greatly appreciated. It is hoped that your comments would be available on or before March 30, 1967.



*Warren J. Turner*  
for Wm. Bruce Dalton  
Planning Director

CITY OF PORTLAND, MAINE  
MEMORANDUM

TO: William Bruce Dalton, Planning Director  
DATE: March 28, 1967

FROM: Gerald E. Mayberry, Director of Building & Inspection Services

SUBJECT: Request for change of zone from R-5 to Residence-Professional  
17-41 Bates Street

It is my feeling that the Residence Professional Zone would be a logical transition between the Baxter Boulevard which is residential and the Business 2 Zone at the corner of Bates Street and Washington Avenue.

To have extended the Business 2 Zone would have allowed uses which could have a degrading effect on this section of Baxter Boulevard.

Gerald E. Mayberry

GEM:m

**PERMIT TO INSTALL PLUMBING**

Date Issued: 1/12/65

By: J.P. Welch  
 PORTLAND PLUMBING INSPECTOR

Address: 37 Biron St.  
 Installation For: Allan R. McManis  
 Owner of Bldg.: Same  
 Owner's Address: Same  
 Plumber: George T. Boyd

**14808**  
 PERMIT NUMBER

APPROVED FIRST INSPECTION  
 Date: 1/12/65

APPROVED FINAL INSPECTION  
 Date: 1/12/65

By: Joseph P. Welch  
 CHIEF PLUMBING INSPECTOR

- COMMERCIAL
- RESIDENTIAL
- SINGLE
- MULTI FAMILY
- NEW CONSTRUCTION
- REMODELING

| PROPOSED INSTALLATIONS              | DATE: <u>1/12/65</u> |       | NUMBER   | FEE           |
|-------------------------------------|----------------------|-------|----------|---------------|
|                                     | NEW                  | REPL. |          |               |
| SINKS                               |                      |       |          |               |
| LAVATORIES                          |                      |       |          |               |
| TOILETS                             |                      |       |          |               |
| BATH TUBS                           |                      |       |          |               |
| SHOWERS                             |                      |       |          |               |
| DRAINS                              |                      |       |          |               |
| HOT WATER TANKS                     |                      |       |          |               |
| TANKLESS WATER HEATERS              |                      |       |          |               |
| GARBAGE GRINDERS                    |                      |       |          |               |
| SEPTIC TANKS                        |                      |       |          |               |
| HOUSE SEWERS                        |                      |       |          |               |
| ROOF LEADERS (Conn. to house drain) |                      |       |          |               |
| TOTAL                               |                      |       | <u>1</u> | <u>\$2.00</u> |

PORTLAND HEALTH DEPT. PLUMBING INSPECTION

TOTAL \$2.00



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, November 6, 1946

PERMIT ISSUED  
02208

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 29 Bates Street Use of Building Dwelling No. Stories 2 Building Existing "XXX"  
Name and address of owner of appliance W. P. Vinson, Bates Street P.O. Box 269 Telephone \_\_\_\_\_  
Installer's name and address Me. Petroleum Service Co., Bath, Maine

General Description of Work  
2  
To install oil burning equipments in connection with <sup>buried</sup> gravity hot water heat.

### IF HEATER, OR POWER BOILER

Location of appliance or source of heat \_\_\_\_\_ Type of floor beneath appliance \_\_\_\_\_  
If 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 Herco Labeled by underwriters' laboratories? yes  
Will operator be always in attendance? no Does oil supply line feed from top or bottom of tank? Bottom  
Type of floor beneath burner Concrete  
Location of oil storage Cellar Number and capacity of tanks 1-275 gallons  
If two 275-gallon tanks, will three-way valve be provided? \_\_\_\_\_ How many tanks fire proofed? \_\_\_\_\_  
Will all tanks be more than five feet from any flame? yes

### IF COOKING APPLIANCE

Location of appliance \_\_\_\_\_ Kind of fuel \_\_\_\_\_ Type of floor beneath appliance \_\_\_\_\_  
If 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

one 275 gallon tank for each burner.

Amount of fee enclosed? \$1.00 (\$1.00 for one heater, etc., 50 cents additional for each additional heater, etc., in same building at same time.)

APPROVED:  
OK 11-6-46 P.M.

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

FILE COPY

Signature of Installer

By: W. Hersey Manager  
Maine Petroleum Service Company



# APPLICATION FOR PERMIT

PERMIT ISSUED  
Permit No. \_\_\_\_\_

MAR 29 1929

Class of Building or Type of Structure Third Class

Portland, Maine, March 29, 1929

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to ~~erect~~ 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 51 Bates Street Ward 9 Within Fire Limits? No Dist. No. \_\_\_\_\_

Owner's or Lessee's name and address Fredrick W. Moore, 230 Federal St. Telephone \_\_\_\_\_

Contractor's name and address NoKol Co. of Maine, 220 Federal St. Telephone F 3422

Architect's name and address \_\_\_\_\_ Telephone \_\_\_\_\_

Proposed use of building Dwelling house

Other buildings on same lot \_\_\_\_\_ No. families 2

## Description of Present Building to be Altered

Material wood No. stories 2 Heat hot water Style of roof \_\_\_\_\_ Roofing \_\_\_\_\_

Last use Dwelling house No. families 2

## General Description of New Work

To install Oil Burner

## Details of New Work

Size, front \_\_\_\_\_ depth \_\_\_\_\_ No. stories \_\_\_\_\_ Height average grade to highest point of roof \_\_\_\_\_

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

Material of foundation \_\_\_\_\_ Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_

Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_

Kind of roof \_\_\_\_\_ Roof covering \_\_\_\_\_

No. of chimneys no Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_

Kind of heat hot water Type of fuel oil Distance, heater to chimney 1'

If oil burner, name and model NoKol Model L This burner labelled and approved by U.S. Lab.

Capacity and location of oil tanks 1 275 gallon tank in basement 15' from heater

Is gas fitting involved? \_\_\_\_\_ Size of service \_\_\_\_\_

Corner posts \_\_\_\_\_ Sills \_\_\_\_\_ 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 \_\_\_\_\_

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 \_\_\_\_\_

Total number commercial cars to be accommodated \_\_\_\_\_

Will automobile repairing be done other than minor repairs to cars habitually stored 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? no No. sheets \_\_\_\_\_

Estimated cost \$ 450. Fee \$ .75

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 owner W.P. Vincent  
By NoKol Co. Of Maine

Fredrick W. Moore



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date March 5, 19 85  
 Receipt and Permit number D 00425

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: 29 Bates St.

OWNER'S NAME: Richard Hubbell ADDRESS: lives there

OUTLETS: Receptacles \_\_\_\_\_ Switches \_\_\_\_\_ Plugmold \_\_\_\_\_ ft. TOTAL 1-30 ✓ 3.00

FIXTURES: (number of) Incandescent 6 Fluorescent \_\_\_\_\_ (not strip) TOTAL 1-10 ✓ 3.00  
 Strip Fluorescent \_\_\_\_\_ ft. \_\_\_\_\_

SERVICES: Overhead \_\_\_\_\_ Underground \_\_\_\_\_ Temporary \_\_\_\_\_ TOTAL amperes \_\_\_\_\_

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 units) \_\_\_\_\_  
 Electric Under 20 kws \_\_\_\_\_ Over 20 kws \_\_\_\_\_

APPLIANCES: (number of) Ranges \_\_\_\_\_ Water Heaters 1 ✓  
 Cook Tops \_\_\_\_\_ Disposals \_\_\_\_\_  
 Wall Ovens \_\_\_\_\_ Dishwashers \_\_\_\_\_  
 Dryers \_\_\_\_\_ Compactors \_\_\_\_\_  
 Fans 4 Others (denote) \_\_\_\_\_  
 TOTAL \_\_\_\_\_ 7.50

MISCELLANEOUS: (number of) Branch Panels \_\_\_\_\_  
 Transformers \_\_\_\_\_  
 Air Conditioners Central Unit \_\_\_\_\_  
 Separate Units (windows) \_\_\_\_\_  
 Signs 2) 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, Fairs, etc. \_\_\_\_\_  
 Alterations to wires fuse panel to breaker panel - 1st floor ✓ 2.00  
 Repairs after fire \_\_\_\_\_  
 Emergency Lights, battery \_\_\_\_\_  
 Emergency Generators \_\_\_\_\_

INSTALLATION FEE DUE: \_\_\_\_\_  
 FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: \_\_\_\_\_  
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....  
 TOTAL AMOUNT DUE: 15.50

INSPECTION: Will be ready on \_\_\_\_\_, 19 \_\_\_\_; or Will Call xx  
 CONTRACTOR'S NAME: John Perry  
 ADDRESS: 381 Danforth St.  
 TEL.: \_\_\_\_\_  
 MASTER LICENSE NO.: 3635 SIGNATURE OF CONTRACTOR: [Signature]  
 LIMITED LICENSE NO.: \_\_\_\_\_

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





PERMIT # 1653 CITY OF Portland BUILDING PERMIT APPLICATION

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: Paul Russo

Address: 29 Bates Street, 04103 871-0345

LOCATION OF CONSTRUCTION 29 Bates Street

CONTRACTOR: \_\_\_\_\_ SUBCONTRACTORS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Est. Construction Cost: \_\_\_\_\_ Type of Use: 1 family w/office

Past Use: 2 family

Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq Ft \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size: \_\_\_\_\_

Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_

Conversion - Explain change use, also erect 7" x 30" sign attached

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE to building

Residential Buildings Only:  
# Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

**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 Only**

|                          |                                             |
|--------------------------|---------------------------------------------|
| Date <u>12/24/87</u>     | Subdivision: Yes / No _____                 |
| Inside Fire Limits _____ | Name _____                                  |
| Bldg Code _____          | Lot _____                                   |
| Time Limit _____         | Block _____                                 |
| Estimated Cost _____     | Permit Expiration: _____                    |
| Value/Structure _____    | Ownership: _____ Public _____ Private _____ |
| Fee <u>25.20</u>         |                                             |

**Ceiling:**

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

**Roof:**

1. Truss or P-oster Size \_\_\_\_\_ Span \_\_\_\_\_
2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_
3. Roof Covering Type \_\_\_\_\_
4. Gable \_\_\_\_\_

**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 \_\_\_\_\_ Special Exception \_\_\_\_\_
- Other (Explain) \_\_\_\_\_
- Date Approved \_\_\_\_\_

Permit Received By Kandi Cote

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of CEO Paul Russo Date 12/24/87

Inspection Dates \_\_\_\_\_

White-Tax Assessor

Yellow-GPCOG

White Tag -CEO

© Copyright GPCOG 1987

B

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP .....
B.O.C.A. TYPE OF CONSTRUCTION ..... 2 650
ZONING LOCATION ..... PORTLAND, MAINE June 8, 1987

JUN 8 1987
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 31 Bates Street Fire District #1 [ ], #2 [ ]
1. Owner's name and address James Hoy same Telephone 775-4790
2. Lessee's name and address Telephone
3. Contractor's name and address same Telephone
Proposed use of building 2 family dwelling No. of sheets
Last use No. families 2
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$ 800.00 Appeal Fees \$
FIELD INSPECTOR—Mr. @ 775-5451 Base Fee
Late Fee
TOTAL \$ 25.00

to install 3 sunlights on roof as per plans

#04103

Stamp of Special Conditions

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

Signature of Applicant James Hoy Phone #
Type Name of above 1 [ ] 2 [ ] 3 [ ] 4 [ ]
Other and Address

PERMIT # 001653 CITY OF Portland BUILDING PERMIT APPLICATION MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

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

Owner: Paul Russo  
 Address: 29 Bates Street, 04103 871-0345  
 LOCATION OF CONSTRUCTION 29 Bates Street  
 CONTRACTOR: \_\_\_\_\_ SUBCONTRACTORS: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_

Est. Construction Cost: \_\_\_\_\_ Type of Use: 1 family w/office  
 Past Use: 2 Family  
 Building Dimensions L \_\_\_\_\_ W \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ # Stories: \_\_\_\_\_ Lot Size: \_\_\_\_\_  
 Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
 Conversion - Explain change use, also erect 7" x 30" sign attached

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE to building  
 Residential Buildings Only:  
 # Of Dwelling Units \_\_\_\_\_ # Of New Dwelling Units \_\_\_\_\_

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 Only    |                                             |
|--------------------------|---------------------------------------------|
| Date: <u>12/24/87</u>    | Subdivision: Yes / No _____                 |
| Inside Fire Limits _____ | Name _____                                  |
| Bldg Code _____          | Lot _____                                   |
| Time Limit _____         | Block _____                                 |
| Estimated Cost _____     | Permit Expiration: _____                    |
| Value Structure _____    | Ownership: _____ Public _____ Private _____ |
| Fee: <u>23.50</u>        |                                             |

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 \_\_\_\_\_  
 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 Levatories \_\_\_\_\_  
 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 RP Street Frontage Req. \_\_\_\_\_ Provided \_\_\_\_\_  
 Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

Review Required:  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_ Subdivisor \_\_\_\_\_  
 Shore and Floodplain Mgmt \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other (Explain) \_\_\_\_\_  
 Date Approved A.K. Winters Dec 28, 1987

Permit Received By Kandi Cote

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of CEO [Signature] Date 12/24/87

Inspection Dates \_\_\_\_\_

**PERMIT ISSUED**  
**DEC 31 1987**  
**CITY OF PORTLAND**

**PERMIT ISSUED**  
**WITH EXPIRES 12/31/87**  
**917th Street**



CITY OF PORTLAND, MAINE

389 CONGRESS STREET  
PORTLAND, MAINE 04101  
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF  
INSPECTION SERVICES DIVISION

December 29, 1987

Mr. Paul Russo  
29 Bates Street  
Portland, ME 04103

RE: 29 Bates Street

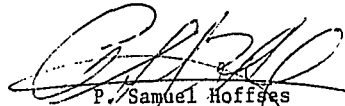
Dear Sir:

Your application to change of use from 2 family to single family with office accountant and environment consultant has been reviewed and a permit is herewith issued subject to the following requirements:

1. All vertical openings shall be enclosed with 1 hour fire rated construction, including fire doors with self-closers.
2. Each apartment shall be provided with an approved single station smoke detector powered by the house current, and installed in a manner which will protect the sleeping area.
3. The boiler room shall be enclosed with 1 hour fire rated construction or 2 domestic sprinkler heads provided.

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

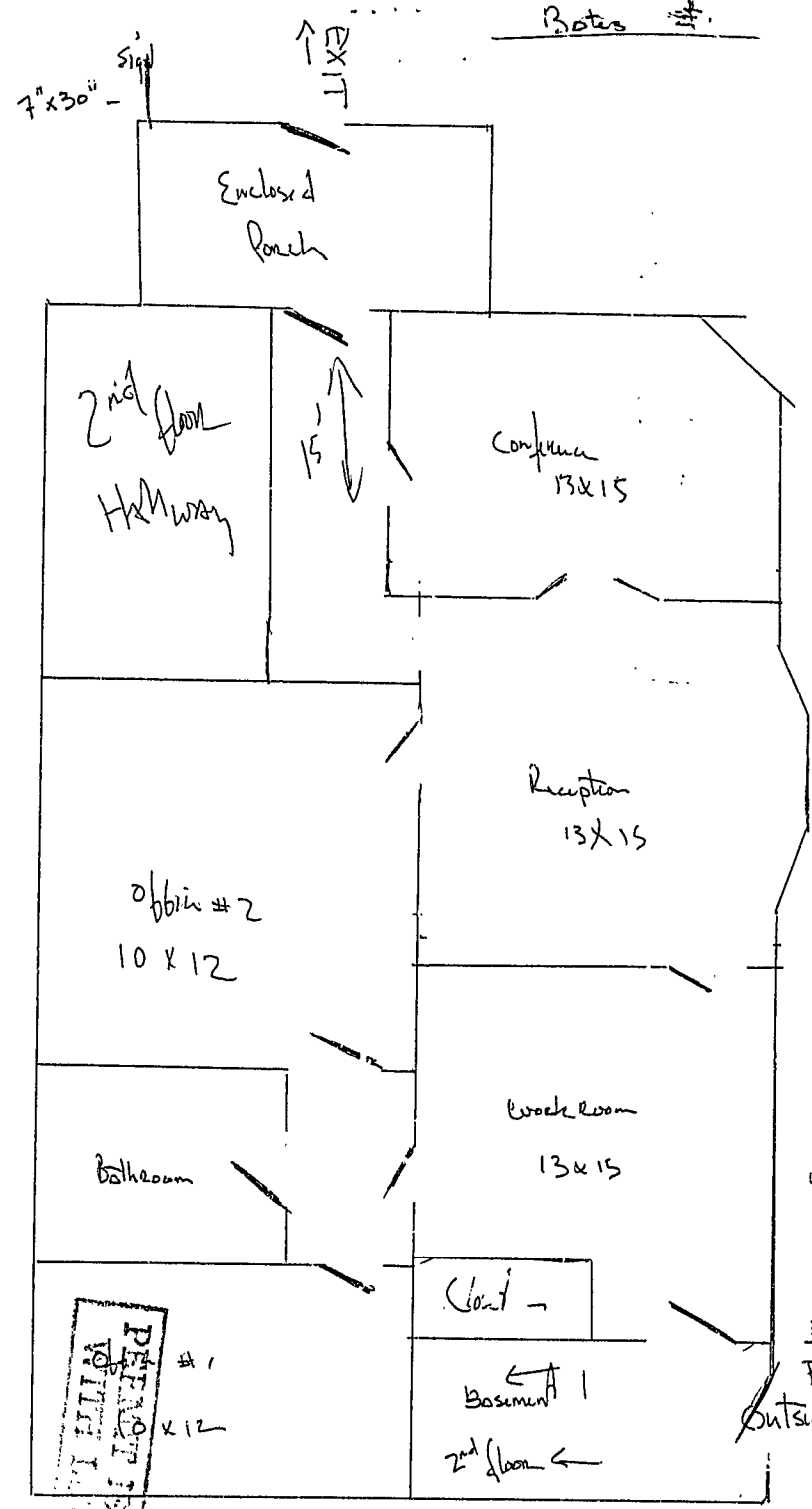
Sincerely,

  
P. Samuel Hoffses  
Chief of Inspection Services

cc: Lt. James Collins, Fire Prevention Bureau

PSH:lab  
Enclosure

Bates #



Paul Brisson  
 29 Bates St.  
 Portland ME  
 04103

**RECEIVED**

DEC 23 1987

DEPT. OF BUILDING INSPECTIONS  
 CITY OF PORTLAND

PROJECT ISSUED  
 TO THE I  
 12/1/87

EXIT  
 Outside Door

CITY OF PORTLAND, MAINE  
DEPARTMENT OF BUILDING INSPECTION

INFORMATION AS TO CERTIFICATES OF OCCUPANCY FOR USE OF PREMISES  
and  
APPLICATIONS THEREFOR

1. The Zoning Ordinance requires that a Certificate of Occupancy shall be procured from the Department of Building Inspection before any use but the raising of crops is commenced on any vacant land, and before any existing use of land, except the raising of crops, is changed to some other use.
2. Applications for Certificates of Occupancy for the use of open land, are to be filed at the Building Department, Room 113, City Hall, by giving the necessary information over the counter to the permit clerk who will make out the application in quadruplicate, and by filing with the application the Site Plan required by the Ordinance.
3. Besides the Site Plan (described below), it is necessary that the applicant be prepared to give the following information:
  - a. Location of property by street and number.
  - b. Owner's name, address and phone number.
  - c. Name, address, and phone number of lessee, if any.
  - d. Existing use, if any, and proposed use of open land involved.
  - e. Number of commercial vehicles to be parked, if any.
  - f. Removal or disturbing of trees on public streets proposed.
4. The Zoning Ordinance requires that a Site Plan be filed with each application. This plan is to be filed as a blueprint with all of the information on it printed from the original (or equivalent duplication method), is to be at a definite indicated scale, to bear the name and address of the maker, and to contain all pertinent information to show compliance with the law, including the following:
  - a. Dimension and shape of the lot;
  - b. Location and dimensions of all buildings and structures, existing and proposed.
  - c. Each parking space (minimum for passenger cars 8 feet by 18 feet), and each loading bay (minimum 14 feet by 50 feet, of which no part may encroach on public sidewalk or street)
  - d. All driveways and maneuvering spaces.
  - e. All vehicular entrances to and exits from the lot over public sidewalks and streets, both existing and proposed, including:
    - (1) Character of curb on public street—existing and proposed;
    - (2) Location and width of approaches and exits over public sidewalks, and character of "curb cuts" or other proposed demarcation.
  - f. Location of ALL trees on public sidewalks or streets along every street frontage of the property.
  - g. Indication of any such trees which are proposed to be removed or disturbed.
  - h. Where off street parking is proposed, (See Section 14 of Ordinance) show in addition to above:
    - (1) Material and depth of sub-grade, and character of surfacing or paving.
    - (2) Surface drainage facilities.
    - (3) Location, height and method of fastening guard curbs and bumper guards.
    - (4) Location, height and material of any fences.
5. Before application and site plan are filed, written approval on the plan of the City Traffic Engineer must be procured for location and width of approaches and exits for vehicles. If access for vehicles is available from more than one street, the additional written approval of the Planning Board is required on the plan.
6. If removal or disturbance of any trees on the public sidewalk or street is proposed, the written approval of the Director of Parks and Recreation must be secured on the site plan, before application and plan are filed.

NOTES

000 0

WORK DONE WITHOUT  
BENEFIT OF AN  
INSPECTION 72

Permit No.

Location

Operator

Date of permit

Approved

Backlog

Charge

Alteration

31 BATES ST

JAMES HOY

[Large section of the page is crossed out with a diagonal line.]

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP .....

JUN 8 1987

B.O.C.A. TYPE OF CONSTRUCTION ..... 0 650

ZONING LOCATION ... R-P ... PORTLAND, MAINE June 8, 1987

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 31 Bates Street

- 1. Owner's name and address James Hoy same Fire District #1 [ ], #2 [ ] Telephone 775-4790
2. Lessee's name and address: Telephone
3. Contractor's name and address: same Telephone

Proposed use of building ... 2 family dwelling No. of sheets
Last use No. families 2

Material ... No. stories ... Heat ... Styl: of roof ... Roofing

Other buildings on same lot
Estimated contractual cost \$ 800.00

FIELD INSPECTOR—Mr. @ 775-5451
Appeal Fees \$
Base Fee
Late Fee
TOTAL \$ 25.00

to install 3 sunlights on roof as per plans

#04103

Stamp of Special Conditions

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: O.K. M.A. Turner June 8, 1987
BUILDING CODE:
Fire Dept.:
Health Dept.:
Others:

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?

Signature of Applicant James E. Hoy Phone #
Type Name of above James Hoy 1 [ ] 2 [ ] 3 [ ] 4 [ ]
Other and Address

19 MA. WILLIAMS FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY



**City of Portland, Maine - Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                                                                                                                                                                                                              |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Location of Construction:<br>25 Bates St                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        | Owner:<br>* Robert Frasier                                                                                                                                                                                   | Phone:<br>90 Edgewood Ptld, ME 04103 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Permit No: <b>950337</b> |
| Owner Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        | Leasee/Buyer's Name:                                                                                                                                                                                         | Phone:                               | Business Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |
| Contractor Name:<br>Regan Construction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                        | Address:<br>64 West St Portland, ME                                                                                                                                                                          |                                      | Phone:<br>04102 761-0121                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |
| Past Use:<br>1-fam                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Proposed Use:<br>1-fam | COST OF WORK:<br>\$ 13,000.00                                                                                                                                                                                |                                      | PERMIT FEE:<br>\$ 85.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |
| Proposed Project Description:<br><br>Make Interior renovations to Kitchen<br><br>From fire damage (cosmetics only)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                        | FIRE DEPT. <input type="checkbox"/> Approved<br><input type="checkbox"/> Denied                                                                                                                              |                                      | INSPECTION:<br>Use Group <i>P3</i> type: <i>5B</i><br><i>BOC 893</i><br>Signature: <i>Hoffman</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        | Signature:                                                                                                                                                                                                   |                                      | Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |
| Permit Taken By:<br>Mary Gresik                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        | Date Applied For:<br>07 April 1995                                                                                                                                                                           |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |
| <ol style="list-style-type: none"> <li>This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..</li> </ol>                                                                                                                                                                              |                        | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)<br>Action: <input type="checkbox"/> Approved<br><input type="checkbox"/> Approved with Conditions<br><input type="checkbox"/> Denied<br>Signature: _____ Date: _____ |                                      | Zoning Appeal<br><input type="checkbox"/> Variance<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Conditional Use<br><input type="checkbox"/> Interpretation<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br>Historic Preservation<br><input checked="" type="checkbox"/> Not in District or Landmark<br><input type="checkbox"/> Does Not Require Review<br><input type="checkbox"/> Requires Review<br>Action:<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Approved with Conditions<br><input type="checkbox"/> Denied<br>Date: <i>4/10/95</i> |                          |
| 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 his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit |                        | SIGNATURE OF APPLICANT: <i>John Regan</i> ADDRESS: _____ DATE: <i>07 April 1995</i> PHONE: _____                                                                                                             |                                      | RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: _____ PHONE: _____<br>White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |

**PERMIT ISSUED**  
 Permit Issued:  
**APR 13 1995**  
**CITY OF PORTLAND**

Zone: *P-F* CBL: 429-3-011  
 Zoning Approval: *OK vs - 4/12/95 to remain 1-fam*  
 Special Zone or Reviews:  
 Shoreland  
 Wetland *10, 1864*  
 Flood Zone  
 Subdivision  
 Site Plan maj  minor  mm

CEO DISTRICT **6**  
*A. Powell*

**City of Portland, Maine - Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

|                                                                                                                          |                                            |                                                                                 |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                      |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Location of Construction:<br><b>25 Bates St</b>                                                                          |                                            | Owner:<br><b>Robert Frasier</b>                                                 | 90 Edgewood                                                             | Phone:<br><b>Ptld, ME 04103</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Permit <b>950387</b> |
| Owner Address:                                                                                                           | Leasee/Buyer's Name:                       | Phone:                                                                          | Business Name:                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                      |
| Contractor Name:<br><b>Regan Construction</b>                                                                            | Address:<br><b>64 West St Portland, ME</b> |                                                                                 | Phone:<br><b>04102 761-0121</b>                                         | <div style="border: 1px solid black; padding: 5px;"> <b>PERMIT ISSUED</b><br/>                 Permit Issued:<br/> <b>APR 13 1995</b> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                      |
| Past Use:<br><b>1-fam</b>                                                                                                | Proposed Use:<br><b>1-fam</b>              | COST OF WORK:<br><b>\$ 13,000.00</b>                                            | PERMIT FEE:<br><b>\$ 85.00</b>                                          | <div style="border: 1px solid black; padding: 5px;"> <b>CITY OF PORTLAND</b><br/>                 Zone: <b>R-P</b> CBL: <b>429-J-011</b><br/>                 Zoning Approval: <b>OK - VS - 4/12/95 10</b><br/>                 Special Zone or Reviews:<br/> <input type="checkbox"/> Shoreland<br/> <input type="checkbox"/> Wetland <b>10, 106</b><br/> <input type="checkbox"/> Flood Zone<br/> <input type="checkbox"/> Subdivision<br/> <input type="checkbox"/> Site Plan <input type="checkbox"/> major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/> </div> |                      |
| Proposed Project Description:<br><b>Make Interior renovations to Kitchen</b><br><b>From fire damage (cosmetics only)</b> |                                            | FIRE DEPT. <input type="checkbox"/> Approved<br><input type="checkbox"/> Denied | INSPECTION:<br>Use Group: <b>193 Type 5B</b><br>Signature: <i>Hoffe</i> | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)<br>Action: <input type="checkbox"/> Approved<br><input type="checkbox"/> Approved with Conditions<br><input type="checkbox"/> Denied<br>Signature: _____ Date: _____                                                                                                                                                                                                                                                                                                                                                                                               |                      |
| Permit Taken By: <b>Mary Greath</b>                                                                                      | Date Applied For: <b>07 April 1995</b>     |                                                                                 |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                      |

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
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**CERTIFICATION**

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07 April 1995

SIGNATURE OF APPLICANT: *John Regan* ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied

Date: *4/14/95*

**GEO DISTRICT** 6

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

COMMENTS

6/15/95 No access Allow

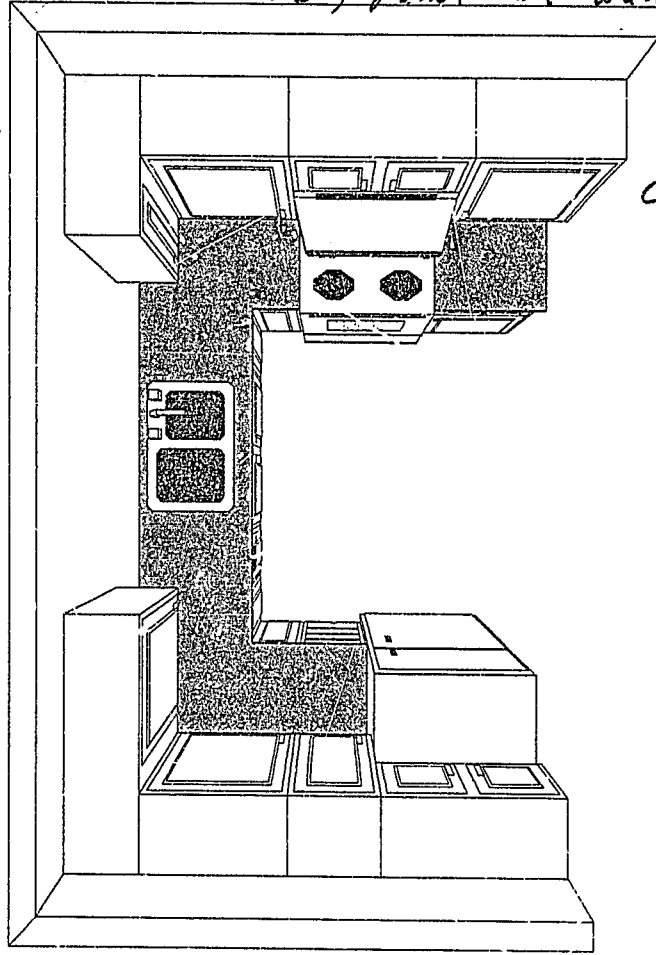
9/6/95

OK, Allow

|             | Type  | Inspection Record | Date  |
|-------------|-------|-------------------|-------|
| Foundation: | _____ | _____             | _____ |
| Framing:    | _____ | _____             | _____ |
| Plumbing:   | _____ | _____             | _____ |
| Final:      | _____ | _____             | _____ |
| Other:      | _____ | _____             | _____ |

Job 25 Bates St.

Note: Was no structural damage, we removed dry wall on walls and ceiling and installed new. New kitchen cabinets, new flooring, new vinyl replacement windows, paint all wall and ceiling

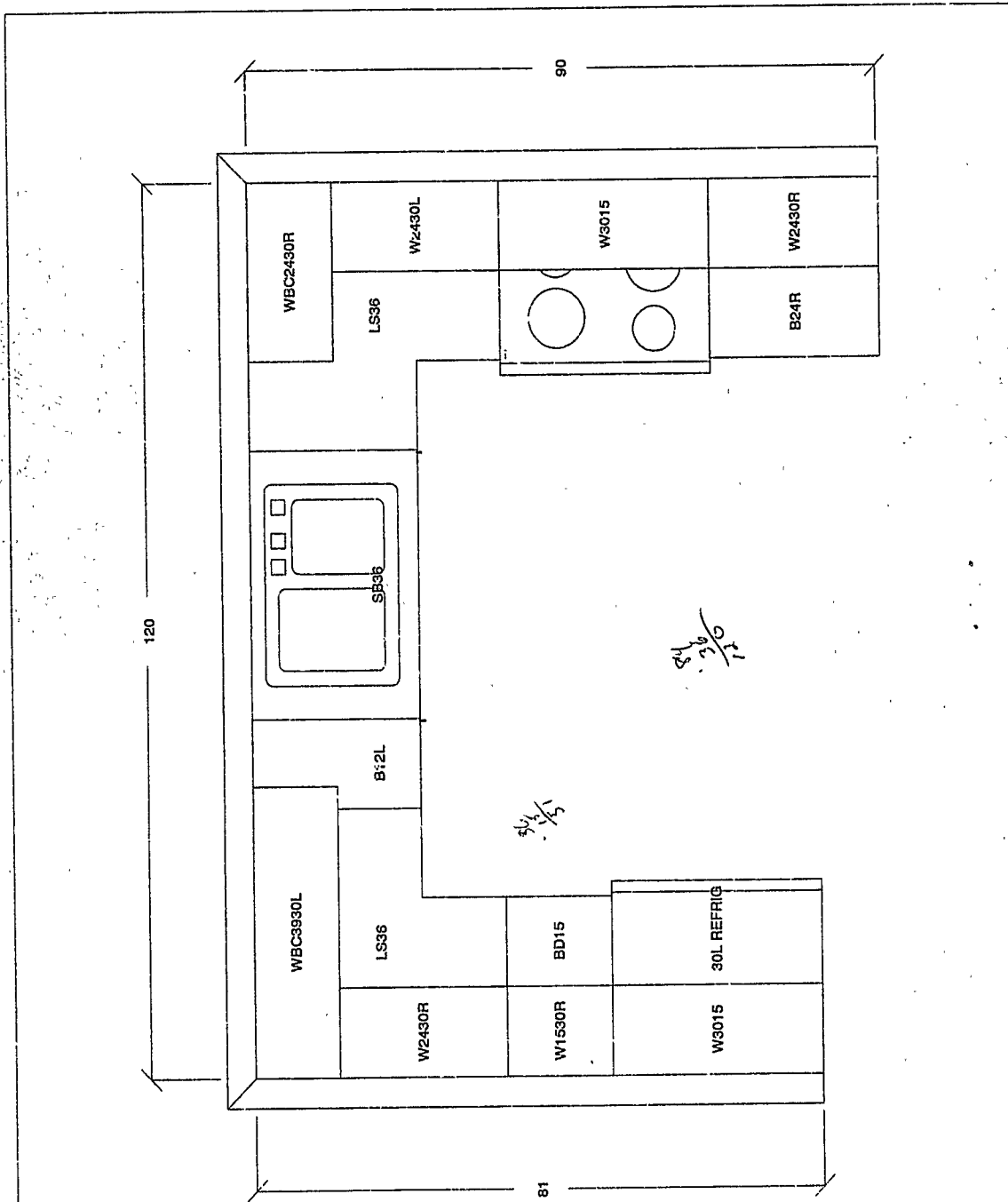


Total Job  
Cost \$13000.00

Note: This drawing is an artistic interpretation of the general appearance of the floor plan. It is not meant to be an exact rendition.

JOHN REGAN

Dwg no.



|                                                                                                                        |                                                                                                                        |            |                              |                   |         |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------|------------------------------|-------------------|---------|
| All dimensions & size designations given are subject to verification on job site and adjustment to fit job conditions. | This is an original design and must not be released or copied unless applicable fee has been paid or job order placed. | JOHN REGAN | Scale : maximum              | Design : 02/07/95 | Dwg no. |
|                                                                                                                        |                                                                                                                        |            | Designer<br>INDISCO OF MAINE | Date : 02/07/95   |         |

Note: This drawing is an artistic interpretation of the general appearance of the floor plan. It is not meant to be an exact rendition.

JOHN REGAN

Dwg no.

