

FLRM AVENUE
100-C-8

LONG ISLAND

MADE IN U.S.A.
ALWAYS

C-31-70-1

November 2, 1931

Mrs. Hattie L. Johnson
Long Island
Fortland, Maine

Dear Madam:

It is reported to this office that you have closed-in your front porch of your building on Fern Avenue, Long Island without first securing a building permit as required by law.

Will you be kind enough to get in touch with this office on or before November 10, 1931, and explain this situation. If you had a carpenter do this work, we should be glad to know his name.

Very truly yours,

Inspector of Buildings.

WM/HO



CITY OF PORTLAND, MAINE
DEPARTMENT OF BUILDING INSPECTION

Complaint No. C-51-70

COMPLAINT

Rec'd 4/27/51

Location Fern Avenue, Long Island (Near Harbor Grace) 100-C-9 Ward 1
Owner's name and address Hattie L. Johnson Long Island, Maine Telephone _____
Tenant's name and address _____ Telephone _____
Use of building Dwelling house

General Description
Closing-in front porch without permit.

Complainant's name and address Bldr. Insp. Dept. ATH Telephone _____

Date of examination and conditions found _____

Action taken _____

INSPECTION COPY

10320

Ward 1 Complaint No. C-31-70

Location Sum Ave, Long Is

Date Received 4/27/31

Date Disposed of 11/5/31

NOTES

11/2/31

Letter - ~~was~~

Has been worked at this
whenever it is called.
Card is up on Hdq.
see serial 6/2036
to connect this work



DEPARTMENT HOUSE 2011
APPLICATION FOR PERMIT

Permit No. 2036
ISSUED
SEP 17 1930

Class of Building or Type of Structure Third Class
Portland, Maine, Sept 17, 1930

To: INSPECTOR OF BUILDINGS, PORTLAND, ME.

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

Location Fern Ave., Long Is. Ward 1 Within Fire Limits? no Dist. No. _____
Owner's or Lessee's name and address Nattie L. Johnson Fern Ave., Long Is. Telephone _____
Contractor's name and address owner Telephone _____
Architect's name and address _____
Proposed use of building dwelling house No. families 1
Other buildings on same lot shed for storage

Description of Present Building to be Altered

Material wood No. stories 2 Height _____ Style of roof _____ Roofing _____
Last use dwelling house No. families 1

General Description of New Work

To enclose one story porch with glass, porch existing prior to Dec. 6, 1926
To recover porch with asphalt shingles Class C Und Lab.

NOTIFICATION BEFORE LATHING
OR CLOSING-IN IS WAIVED.

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS

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? solid earth or rock? earth
Material of foundation _____ Thickness, top _____ bottom _____
Material of underpinning _____ Height _____ Thickness _____
Kind of roof _____ Roof covering _____
No. of chimneys _____ Material of chimneys _____ of lining _____
Kind of heat _____ Type of fuel _____ Distance, heater to chimney _____
If oil burner, name and model _____
Capacity and location of oil tanks _____
Is gas fitting involved? _____ Size of service _____
Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
Material columns under girders _____ 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 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 \$ 26 Fee \$ 38.50

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes
Signature of owner Mrs. Nattie L. Johnson

INSPECTION COPY

3069

Ward 1 Permit No. 30/2036

Location Levan Ave - Long St

Owner Walter L. Johnson

D. e of permit 9/17/30

Notif. closing-in _____

Inspn. closing-in _____

Final Notif. _____

Final Inspn. _____

Cert. of Occrpancy issued _____

NOTES

100
C
704

B PERMIT # 1418 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: John Billings

Address: RR 1 Box 64 Long Island 04054 766-5546

LOCATION OF CONSTRUCTION: Fern Avenue, Long Island

CONTRACTOR: Owner SUBCONTRACTORS: _____

ADDRESS: _____

Est. Construction Cost: \$786.45 Type of Use: Shed

Past Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain: to construct 12' x 20' shed

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

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 _____
3. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____

For Official Use Only

Date: 10/23/87 Subdivision: Yes No

Inside Fire Limits _____ Name _____

Set Back Code: _____ Lot _____

Time Limit: _____ Block _____

Estimated Cost: 786.45 Permit Expiration: _____

Value/Structure: 425.00 Ownership: _____ Public _____ Private _____

Fee: _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Trapping Size _____ Spacing _____
3. Type Ceiling: PERMANENT
4. Insulation Type _____ Size _____
5. Ceiling Height: NOV 2 1987

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type: City of Portland
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 a soil test if required Yes No
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Zoning:

District: _____ Street: _____ Provided: _____

Review Required: Required Subbacks: Front _____ Back _____ Side _____

Zoning Board Approval: Yes No Date: _____

Planning Board Approval: Yes No Date: _____

Conditional Use _____ Variance _____ Size Plan _____ Subdivision _____

Shoreline Floodplain Mgmt _____ Special Exception _____

Other: (Explain) _____

Date Approved _____

Permit Received By: Kandi Cote

Signature of Applicant: John Billings Date: _____

PERMIT # 188

CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: Karyn Zywiec

Address: PO Box 147 Scarborough, ME 04074 774-9801

LOCATION OF CONSTRUCTION: Fern Avenue, Long Island

CONTRACTOR: Owners SUBCONTRACTORS: _____

ADDRESS: _____

Est. Construction Cost: 300 Type of Use: Access building

Part Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain: Construct new structure, 8' x 16', as per plans

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundations:

- 1. Type of Soil: _____
- 2. Set Backs - Front _____ Rear _____ Side(s) _____
- 3. Footings Size: _____
- 4. Foundation Size: _____
- 5. Other: Partial cement block and partial cement sono tubes aprx 6" diameter

Floors:

- 1. Sills Size: _____ Sill 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: wood

Exterior Walls:

- 1. Studding Size: 2 x 4 Spacing: 16"
- 2. No. Windows: 2
- 3. No. Doors: 1 double door
- 4. Header Size: _____ Spacing: _____
- 5. Bracing: Yes _____ No _____
- 6. Corner Posts Size: 6" cement sono tube
- 7. Insulation Type: none Size: none
- 8. Sheathing Type: _____ Size: _____
- 9. Siding Type: T-111 Weather Exposure: _____
- 10. Masonry Material: none
- 11. Metal Material: none

Interior Walls:

- 1. Studding Size: 2 x 4 Spacing: 16"
- 2. Header Size: _____ Spacing: _____
- 3. Wall Covering Type: unfinished
- 4. Fire Wall if required: n/a
- 5. Other Materials: _____

White-Tax Assesor

Yellow-GPCOG

White Tag -CEG

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Date: March 4, 1988 Subdivision: Yes / No _____
 Inside Fire Limits: _____ Name: _____
 Bldg Code: _____ Lot: _____
 Time Limit: _____ Block: _____
 Estimated Cost: 300 Permit Expiration: _____
 Value/Structure: _____ Ownership: _____ Public _____ Private _____
 Fee: 25

Ceiling:

- 1. Ceiling Joists Size: _____
- 2. Ceiling Strapping Size _____ Spacing _____
- 3. Type Ceilings: _____ MAR 9 1988
- 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 Fixtures: _____
- 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 _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Set Back _____ Subdivision _____
 Shore and Floodplain mgmt _____ Special Exception _____
 Other: (Explain) _____
 Date Approved: _____

Permit Received By Lynne Benoit

Signature of Applicant Karyn Zywiec Date 3/4/88

Signature of CEO Karyn Zywiec Date _____

Inspection Dates: _____