

**IMPORTANT NOTE**—If you reside or have your principal office in the localities of a Chapter or Chapters of The Institute which are opposed to the "Architects' Roster" or the "Register of Architects Qualified for Federal Public Works", do not answer or fill out the questionnaire.

CITY OF Auburn Maine

STATE OF Maine

DATE May 6, 1946

**QUESTIONNAIRE FOR ARCHITECTS' ROSTER AND/OR REGISTER OF ARCHITECTS QUALIFIED FOR FEDERAL PUBLIC WORKS**

**TYPING IS MANDATORY. PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.**  
Pink copy is to be retained by the author; other copies to be mailed to The American Institute of Architects, 1741 New York Avenue, N. W., Washington 6, D. C.

1. (a) **FIRM** (individual or partnership) Stanley S. Merrill
- (b) **FORMER FIRM**, if any none
2. **BUSINESS ADDRESS** 9 Vine Street
3. **YEAR ESTABLISHED** 1931

4. PERSONAL HISTORIES OF PRINCIPALS	Name of Principal	Name of Principal
	<u>Stanley S. Merrill</u>	

Furnish data complete, but keep to essentials. Describe each member of firm individually; if more than two, append extra sheets.

- (a) **Date of Birth** 12/12/1895
- (b) **Education** high school  
private instruction in engineering & design
- (c) **Experience Prior to Own Practice**  
(Give architect or architectural firm affiliations, positions held, and approximate dates of employment.)
- |           |                        |                 |          |       |
|-----------|------------------------|-----------------|----------|-------|
| 1915-16   | apprentice one year to | Harry S. Coombs | Lewiston | Maine |
| 1916      | draftsman              | "               | "        | "     |
| 1919-1930 | chief draftsman        | "               | "        | "     |
- (d) **Commenced Practice** 1931
- (e) **Number of Years a Principal** 15

*The  
drop*

(f) **Architectural Licenses**

(Give State, Number and Year Issued.)

Maine No. 19 issued 1945

(g) **Professional Societies and Offices Held**

(h) **Service in World Wars I and II.** (Append data if desired.)

Aerial photography Section U.S. Army Air Force World War I  
rank of private

(i) **Civic Activities**

Selective Service Board from May 1942 to May 1946  
Auburn Loan & Bldg. Asso. Director since 1935  
Member of Kiwanis since 1936  
Director of Shrine Club  
Member of School Board 1941-1945

**5. CONSULTANTS USUALLY EMPLOYED:**

(If a member of your staff, so state)

(a) **STRUCTURAL ENGINEERS**

Name of Firm or Individual Cleverdon, Varney & Pike  
Business Address 120 Tremont St. Boston Mass.

(b) **HEATING & VENTILATING ENGINEERS**

Name of Firm or Individual A. B. Fels Co. Union St. Portland Maine  
Business Address Stilphen Engineering Co. Sanford Maine

(c) **ELECTRICAL ENGINEERS**

Name of Firm or Individual  
Business Address

(d) **PLUMBING OR SANITARY ENGINEERS**

Name of Firm or Individual  
Business Address

(e) **LANDSCAPE ARCHITECTS**

Name of Firm or Individual  
Business Address

**6. OTHER REMARKS RE QUALIFICATIONS:**.....  
 (Append extra sheet if necessary).....  
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**7. SUMMARY OF PROJECT COSTS:**

	Largest Single Job	All Jobs Valuation	Annual Average
Work Completed 1930-1940	\$105,000.00	350,000.00	
Work Completed 1941-1946	90,000.00	400,000.00	
Current Work under construction or working drawings authorized	\$500,000.00	1,335,000.00	

**8. REPRESENTATIVE WORK FOR WHICH YOU WERE ARCHITECT OR WERE ASSOCIATED WITH OTHERS:**

(a) **Three Projects Not Exceeding Cost of \$300,000:**

Name of Project	Cost	Location	Owner
Sears *Roebuck Bldg.	105,000.00	Lewiston Maine	B. Peck Co.
Norway Armory	90,000.00	Norway Maine	State of Maine
Synagogue	40,000.00	Auburn Maine	Cong. Beth Abraham
C. M. G. Hospital	90,000.00	Lewiston Maine	C. M. G. Hosp.

(b) **Three Projects Costing From \$300,000 to \$1,000,000:**

Name of Project	Cost	Location	Owner
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(c) **Three Projects Costing Over \$1,000,000:**

Name of Project	Cost	Location	Owner
.....			
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.....			

**9. PHOTOGRAPHS/PHOTOSTATS:**

The author submits herewith photographs or photostats (size 8" x 10") of several buildings for which he has been the Architect, as follows: (N.C.A.R.B. presentation acceptable.)

.....  
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**10. COLLABORATION WITH JUNIOR ARCHITECTS:**

(a) If an established individual or firm, are you willing to collaborate with other firms or individuals which would permit junior architects to qualify and help further their professional careers?

yes .....

(b) If in private practice at this time, name associates (if additional architects are to be added to your organization) for the purpose of qualifying:

.....  
.....

(c) If **not** in private practice at this time, name established architect or firm with whom you have agreed to collaborate, for the purpose of qualifying:

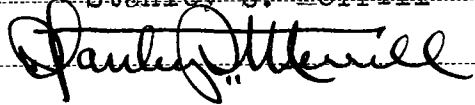
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11.(a) I/We wish to be  included in the Architects' Roster  
do not wish to be

(b) I/We would like to be  considered for the Register of Architects Qualified for Federal Public Works  
do not wish to be

I/We hereby certify that the above is a true statement of facts.

Name of Firm or Individual..... Stanley S. Merrill.....

Signed by all Principals: 

.....  
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.....

NOTE: The American Institute of Architects in compiling, keeping and servicing this Architects' Roster, does so purely as a service to the profession. The A.I.A. has not checked this questionnaire for accuracy and assumes no responsibility as to the statements made herein.

CITY Auburn COUNTY Androscoggin  
 STATE Maine  
 DATE Oct. 27, 1947

## QUESTIONNAIRE FOR ARCHITECTS' ROSTER

**TYPING IS MANDATORY. PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.**

Green copy to be retained by the author; original and other copy to be mailed to the Director of Public and Professional Relations, The American Institute of Architects, 1741 New York Avenue, N. W., Washington 6, D. C.

1. (a) FIRM (individual or partnership) Stanley S. Merrill
- (b) FORMER FIRM, if any \_\_\_\_\_
2. BUSINESS ADDRESS 9 Vine St. Auburn Maine
3. YEAR ESTABLISHED 1931

4. PERSONAL HISTORIES OF PRINCIPALS	Name of Principal	Name of Principal
	<u>Stanley S. Merrill</u>	

Furnish data complete, but keep to essentials. Describe each member of firm individually; if more than two, append extra sheets.

- (a) Date of Birth Dec. 12, 1895
- (b) Education Public Schools  
Apprenticeship
- (c) Experience Prior to Own Practice  
 (Give architect or architectural firm affiliations, positions held, and approximate dates of employment.)  
Office of Harry S. Coombs, Architect, Lewiston Maine  
1915-1916...Apprentice  
1916-1919...Draftsman  
1919-1930...Chief Draftsman
- (d) Commenced Practice 1931
- (e) Number of Years a Principal 16

(f) **Architectural Licenses**

(Give State, Number and Year Issued.)

..... Maine No. 19 issued 1945 .....

(g) **Professional Societies and Offices Held**

..... Aerial Photography Section U.S. Army Air Force World War I .....

(h) **Service in World Wars I and II.** (Append data if desired.)

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.....

(i) **Civic Activities**

..... Selective service from May 1942 to May 1946 .....

..... Auburn Loan & Bldg Assoc. as Director since 1935 .....

..... Member of Kiwanis since 1936 .....

..... Director of Shrine Club .....

..... Member School Board 1941-1945 .....

**5. CONSULTANTS USUALLY EMPLOYED:**

(If a member of your staff, so state)

(a) **STRUCTURAL ENGINEERS**

Name of Firm or Individual Hayden, Harding & Buchanan  
Business Address 826 Park Sq. Bldg. Boston Mass.

(b) **HEATING & VENTILATING ENGINEERS**

Name of Firm or Individual Hayden, Harding & Buchanan  
Business Address A.B.Fels, Union St. Portland Maine

(c) **ELECTRICAL ENGINEERS**

Name of Firm or Individual Hayden Harding & Buchanan  
Business Address .....

(d) **PLUMBING OR SANITARY ENGINEERS**

Name of Firm or Individual Hayden Harding & Buchanan  
Business Address .....

(e) **LANDSCAPE ARCHITECTS**

Name of Firm or Individual none  
Business Address .....



**8. PHOTOGRAPHS/PHOTOSTATS (Not Mandatory):**

The author submits herewith photographs or photostats (size 8" x 10") of several buildings for which he has been the Architect, as follows: (N.C.A.R.B. presentation acceptable.)

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**9. COLLABORATION WITH OTHER ARCHITECTS:**

(a) As an established individual or firm, are you willing to collaborate with other firms or individuals?

.....  
**Yes**

(b) Are you and/or your firm agreeable to accepting supervision of work where designs are produced by others— or vice versa?

.....  
**Yes**

(c) List firms (or individuals) with which you are associated at present or have an associate or working agreement: (Please furnish a letter from the other party verifying the association.)

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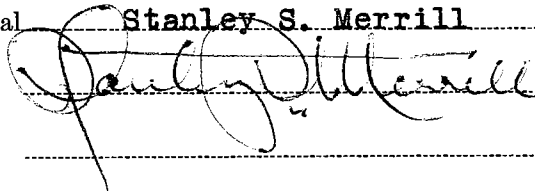
**10. I/WE DO  DO NOT  DESIRE TO HAVE OUR (THIS) QUESTIONNAIRE MADE AVAILABLE TO GOVERNMENTAL AGENCIES.**

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I/We hereby certify that the above is a true statement of facts.

Name of Firm or Individual Stanley S. Merrill

Signed by all Principals:





NOTE: The American Institute of Architects in compiling, keeping and servicing this Architects' Roster, does so purely as a service to the profession. The A.I.A. has not checked this questionnaire for accuracy and assumes no responsibility as to the statements made herein.

Merrill

CITY Auburn COUNTY Androscoggin  
 STATE Maine  
 DATE May 13, 1949

## SUPPLEMENTAL DATA SHEET

### QUESTIONNAIRE FOR ARCHITECTS' ROSTER

**TYPING IS MANDATORY. PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.**

Green copy to be retained by the author; original and other copy to be mailed to the Department of Public and Professional Relations, The American Institute of Architects, 1741 New York Avenue, N. W., Washington 6, D. C.

1. (a) **FIRM** (individual or ~~partnership~~) Stanley S. Merrill  
 (b) **FORMER FIRM**, if any none

2. **BUSINESS ADDRESS** 9 Vine Street, Auburn, Maine

3. **REPRESENTATIVE WORK FOR WHICH YOU WERE OR ARE ARCHITECTS; OR WERE OR ARE ASSOCIATED WITH OTHERS SINCE FILING ORIGINAL QUESTIONNAIRE:**

Name of Project	Location	Date	Cost	Architect or Associate Architect
<u>C.M.G. Hospital</u>	<u>Lewiston</u>	<u>48-49</u>	<u>640,000</u>	<u>Architect</u>
<u>St. Mary's Hospt.</u>	<u>Lewiston</u>	<u>49-50</u>	<u>1,600,000</u>	<u>"</u>
<u>Residence</u>	<u>Yarmouth Me.</u>	<u>49</u>	<u>75,000</u>	<u>"</u>

4. **ADDITIONAL ARCHITECTURAL LICENSES SINCE FILING ORIGINAL QUESTIONNAIRE:**  
 (Give State, Number and Year Issued.)  
Maine 19, 1949

5. **PROFESSIONAL SOCIETIES AND OFFICES HELD AND CIVIC ACTIVITIES SINCE FILING ORIGINAL QUESTIONNAIRE:**  
Appraiser for new construction for Veterans Administration  
for Lewiston-Auburn, Mechanic Falls and Lisbon

6. I/WE DO  DO NOT  DESIRE TO HAVE OUR (THIS) QUESTIONNAIRE MADE AVAILABLE TO GOVERNMENTAL AGENCIES.

I/We hereby certify that the above is a true statement of facts.

Name of Firm or Individual Stanley S. Merrill ✓  
 Signed by all Principals: Stanley S. Merrill

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**SUPPLEMENTAL DATA SHEET**

STATE MAINE  
 CITY AUBURN COUNTY ANDROSCOGGIN  
 DATE FEB. 6, 1953

**ARCHITECTS' ROSTER QUESTIONNAIRE**

Original and one copy to be mailed to THE ARCHITECTS' ROSTER, The American Institute of Architects, 1735 New York Avenue, N. W., Washington 6, D. C. One copy to be retained by the author.

- 1 a FIRM** (Indicate whether individual, partnership or corporation.)  
STANLEY S. MERRILL (individual)
- b FORMER FIRM**, Name if any.....
- 2 BUSINESS ADDRESS** 9 Vine St. Auburn Maine **PHONE** Lewiston 4-6122
- 3 REPRESENTATIVE WORK FOR WHICH YOU WERE OR ARE ARCHITECTS; OR WERE OR ARE ASSOCIATED WITH OTHERS SINCE FILING ORIGINAL QUESTIONNAIRE:**  
 (In left margin, mark \*—U. S. Government Projects, \*\*—projects not yet complete.)

Name and type of project	Location	Date	Cost	Indicate whether as Architect or Associate Architect
** Elem. School	Lewiston Me.		280,000.00	Architect
** " "	Hallowell Me.		220,000.00	"
** " "	Richmond Me.		70,000.00	"
** Surgical Bldg	Fairfield Me.		500,000.00	"
Shoe factory	Auburn Me.		150,000.00	"

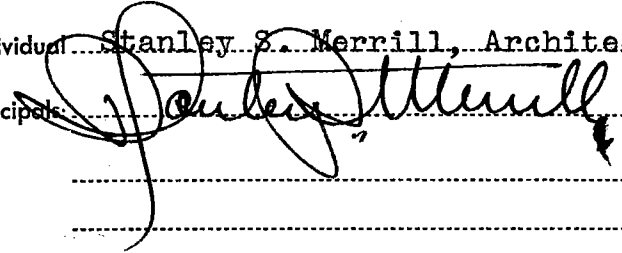
**4 Use the following space to bring your original Roster Questionnaire up to date by listing new licenses obtained, new memberships in professional societies, or other new qualifications.**

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**5 THIS QUESTIONNAIRE MAY BE MADE AVAILABLE TO GOVERNMENTAL AGENCIES.**  **yes**  **no**

The undersigned hereby certify that the above is a true statement of facts.

Name of Firm or Individual Stanley S. Merrill, Architect

Signed by all Principals: 



STATE MAINE  
 CITY AUBURN COUNTY ANDROSCOGGIN  
 DATE FEB. 6, 1953

## ARCHITECTS' ROSTER QUESTIONNAIRE

### TO EVERY ARCHITECT IN THE UNITED STATES AND ITS POSSESSIONS:

The Architects' Roster is maintained by The American Institute of Architects as a service to the profession as a whole and to agencies of the United States Government. Every registered architect, whether or not a member of The Institute, is eligible for inclusion in the Roster. The Institute maintains custody of the Roster, keeps it up to date and in good order for use. The Roster is available to any representative of the Government and to representatives of foreign governments in Washington. Reference may be made to The Architects' Roster in negotiations with government agencies and other interested parties. Experience with the Roster since its establishment in 1946 has shown its usefulness. Growing out of an earlier Register of architects qualified for public works, The Roster provides at The Octagon an accurate, current record of the qualifications and achievements of members of the profession. It allows a positive and helpful response to requests for factual information on architects, and in that way constitutes a service to the profession.

The American Institute of Architects assumes no responsibility for the accuracy of statements made in this Questionnaire. The obligation to maintain this record as a current description of an architectural firm rests with the firm, and supplementary record forms are available for this purpose.

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### PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.

Original and one copy to be mailed to THE ARCHITECTS' ROSTER, The American Institute of Architects, 1735 New York Avenue, N. W., Washington 6, D. C. One copy to be retained by the author.

- 1 a FIRM** (Indicate whether individual, partnership or corporation.)  
STANLEY S. MERRILL (individual)
- b FORMER FIRM**, Name if any.....
- 2 STREET ADDRESS** 9 Vine St. Auburn Maine **Phone** Lewiston 4-6122
- 3 YEAR ESTABLISHED** 1931

#### 4 PERSONAL HISTORIES OF PRINCIPALS

Furnish data complete, but keep to essentials. Describe each member of firm individually; if more than four, append extra sheets.

STANLEY S. MERRILL

NAME OF PRINCIPAL

NAME OF PRINCIPAL

a Date of Birth Dec. 12, 1895

b Place of Birth Auburn Maine

c Education High School  
apprenticeship

#### d Experience Prior to Own Practice

(Give architect or architectural firm affiliations, positions held, and approximate dates of employment.)

Office of Harry S. Coombs Lewiston Maine

1915-1916 apprentice

1916-1919 draftsman

1919-1930 chief draftsman

e Commenced Practice 1931

f Number of Years a Principal 22

g Architectural Licenses (Give State, Number and Year issued.)

Maine No. 19 1945

#### h Membership in Professional Societies and Offices Held

i Service in World Wars I and II (Append data if desired.)

U.S. Army World War I. Aerial Photography Section

#### j Civic Activities

Director Auburn Loan & Bldg. since 1935

Member Kiwanis Club since 1936

Past Pres. Shrine Club

Past member School Board

Past member Draft Board

**8 PHOTOGRAPHS/PHOTOSTATS**

Not mandatory. Submit herewith photographs or photostats (size 8" x 10") of several buildings for which you have been the Architect, as follows: (N.C.A.R.B. presentation acceptable.)

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**9 COLLABORATION WITH OTHER ARCHITECTS:**

**a** As an established individual firm, are you willing to collaborate with other firms or individuals?

..... Yes .....

**b** Are you and/or your firm agreeable to accepting supervision of work where designs are produced by others—or vice versa?

..... No .....

**c** List firms (or individuals) with which you are associated at present or have an associate or working agreement: (Please furnish a letter from the other party verifying the association.)

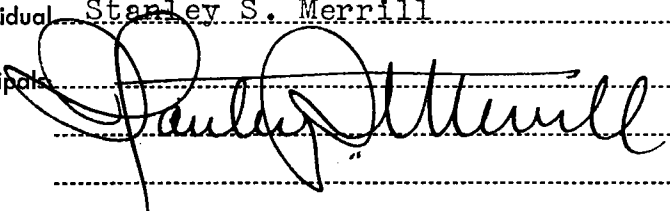
..... none .....

**10 THIS QUESTIONNAIRE MAY BE MADE AVAILABLE TO GOVERNMENTAL AGENCIES**

yes  no

The undersigned hereby certify that the above is a true statement of facts.

Name of Firm or Individual Stanley S. Merrill

Signed by all Principals 

**5 REMARKS CONCERNING QUALIFICATIONS OF FIRM**

(This space is best used to present qualifying information such as number of employees, amount of office space, financial information and other information presumed of interest to a prospective client. Append extra sheet or use back of this form, if necessary.)

Much experience in Hospital and School work. Office force well qualified for all types of work.

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**6 CONSULTANTS USUALLY EMPLOYED: (If a member of your staff, so state.)**

**a STRUCTURAL ENGINEERS**

Name of Firm or Individual R.G.Vanderweil

Business Address 9 Newbury St. Boston Mass.

**b HEATING AND VENTILATING ENGINEERS R.G.Vanderweil**

Name of Firm or Individual Norman E. Stilphen

Business Address 26 Roberts St. Sanford, Maine

**c ELECTRICAL ENGINEERS**

Name of Firm or Individual Hayden, Harding & Buchanan

Business Address Park Sq. Bldg. Boston 16, Mass

**d PLUMBING OR SANITARY ENGINEERS**

Name of Firm or Individual R. G. Vanderweil

Business Address 9 Newbury St. Boston Mass

**e LANDSCAPE ARCHITECTS**

Name of Firm or Individual.....

Business Address.....

**f OTHER (Civil, Foundation or Mechanical Engineers, Appraiser, Equipment Designers, Valuators, Industrial Layout Engineers, etc.)**

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