

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0006	Issue Date:	CBL: 013 D008001
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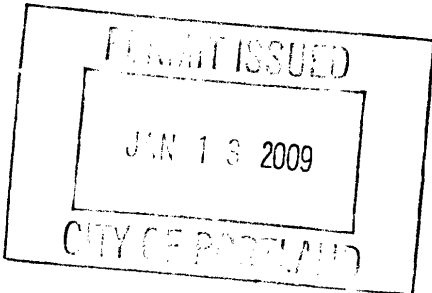
Location of Construction: 19 ANDERSON ST	Owner Name: BERG ELIZABETH C	Owner Address: 19 ANDERSON ST	Phone:
Business Name:	Contractor Name: Frost N Flame	Contractor Address: 629 Main St. Gorham	Phone 2078567000
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-6

Past Use: 3 Unit Residential	Proposed Use: 3 Unit Residential - Install a Jotul GF200 DVII second floor	Permit Fee: \$50.00	Cost of Work: \$2,700.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>See Condition</i>	INSPECTION: Use Group: R2 Type: SB IBC 2003 ST ME GAS REQS	

Proposed Project Description: Install a Jotul GF200 DVII second floor	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i> 01/13/09
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: Idobson	Date Applied For: 01/05/2009	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>3. 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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input checked="" type="checkbox"/></p> <p>Date: <i>01/15/09</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>[Signature]</i></p>
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CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as 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 is 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 provision of the code(s) applicable to such permit.

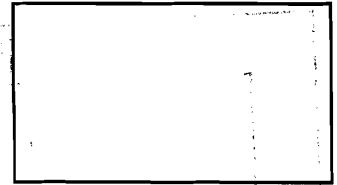
SIGNATURE OF APPLICANT _____ ADDRESS _____ DATE _____ PHONE _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ DATE _____ PHONE _____



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



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 / CBL 19 Anderson St # 2 ¹³⁰⁸ Use of Building Multl unit } Date 1-5-09
 Name and address of owner of appliance Elizabeth C Berg 19 Anderson St # 1
Portland Me 04101
 Installer's name and address same
Frost n Flame 946-1000 or 943 2876 Telephone 207-774-4508

Location of appliance:

- Basement
- Floor ^{2nd}
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Jotul GF 200 DV II (NFPA 54) ^{# ANSI Z21.08-1990}
 U.L. Approved Yes No Lillehammer

Will appliance be installed in accordance with the manufacture's installation instructions? Yes No

IF NO Explain: _____

Bob Dodge

The Type of License of Installer:

- Master Plumber # _____
- Solid Fuel # _____
- Oil # _____
- Gas # PNT 3736
- Other _____

Type of Chimney:

- Masonry Lined
Factory built no chimney
direct vent thru wall
- Metal
Factory Built U.L. Listing # _____

Direct Vent
Type Belkirk pipe UL# 13LL

Type of Fuel Tank

- Oil n/a
- Gas 2

Size of Tank n/a

Number of Tanks n/a

Distance from Tank to Center of Flame n/a feet.

Cost of Work: \$ 2700

Permit Fee: \$ 50

aaron

Approved

Approved with Conditions

Fire: _____
 Ele.: _____
 Bldg.: _____

See attached letter or requirement

Signature of Installer Elizabeth C Berg

Inspector's Signature _____

Date Approved _____