City of Portland, Maine - Building or Use Permit Application					Permit No:	Issue Date:		CBL:	
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716				6 09-0230			014 H015001		
	Owner Name:			Owner Address:				Phone:	
45 TURNER ST	HAGGE CYRUS Y & PATRICIA			225 COMMERCIAL ST					
Business Name:	Contractor Name:		_	Contractor Address:			Phone		
Pine State Plu		mbing &	& Heating	PO Box 6308 Scarborough				2073212	
Lessee/Buyer's Name	Phone:			ı	rmit Type:				Zone:
			<u> </u>	HVAC					1R6
Past Use: Proposed Use:					1	Cost of Worl	i i	O District:	- }
2 unit residential 2 unit resident 6B142 direct v		ial - install a Buderus vent boiler					INSPECTI	ECTION: Group: R3 Type:578 TRC Zn3	
D							1	RC.	2n3
Proposed Project Description: install a Buderus 6B142 direct vent bo	viler			1			2	13/25/ng	
mstan a Buderus ob 142 direct vent oc	, incl			Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.				D.)	0-125/01
				l	ction: Approve		roved w/Con	·	Denied
					gnature:		Da		J
Permit Taken By: Date Ap.	plied For:	r			Zoning A	A nnrova			
1 -	03/24/2009				Zoning A	Approva	.1		
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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 		Spe	cial Zone or Review	ws	Zoning	Appeal		Historic Pro	eservation
		☐ Shoreland ☐ Wetland ☐ Flood Zone ☐ Subdivision		☐ Variance			Not in District or Landmark		
				Miscellaneous		P	Does Not Require Review		
				Conditional Use			Requires Review		
				☐ Interpretation			Approved		
- COUED			Site Plan		Approved			Approved w/Conditions	
PERMIT ISSUED		Maj Minor MM] Denied			Denied		
MAR 2 5 2009			Date: Jm 3/25/09		Date: D		Date:	Date: Jn 3/25/09	
CUA CE BOSSITAN									
The second section of the second section of the second section of the second section s									
		C	ERTIFICATIO	NC					
I hereby certify that I am the owner of I have been authorized by the owner to jurisdiction. In addition, if a permit for shall have the authority to enter all area such permit.	make this appli work described	cation a	as his authorized application is is	ag sue	ent and I agree to ed, I certify that the	conform to code off	o all appli icial's auth	cable law: orized rep	s of this presentative
suon permit.									
SIGNATURE OF APPLICANT			ADDRESS	-		DATE	_	PH	ONE
RESPONSIBLE PERSON IN CHARGE OF WO	ORK TITLE					DATE		PHO	ONE



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

H	
ALL CONTRACTOR	1

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a per	rmit to install the fo	llowing heating, cod	oking or power e	quipment in
accordance with the Laws of Maine, the Building	g Code of the City of	of Portland, and the	following specif	ications:

Approved Fire: Ele.: Bldg.: Signature of Installer	Approved with Conditions See attached letter or requirement Inspector's Signature Date Approved					
Annroyed	Annovad with Conditions					
Other	Permit Fee: \$					
■ Gas # PNT 3600	Cost of Work: \$ 9,800 000					
☐ Solid Fuel #	Distance from Tank to Center of Flame feet.					
Master Plumber #						
The Type of License of Installer:	Number of Tanks					
IF NO Explain:	Size of Tank NA Natural Cas					
installation instructions? E (Yes	Type of Fuel Tank Oil Gas					
Will appliance be installed in accordance with the manufacture's						
U.L. Approved X Yes D No	Type PV UL#					
Appliance Name: Buters 68 142	☑ Direct Vent					
Gas 🗆 Oil 🗅 Solid	Factory Built U.L. Listing #					
Type of Fuel:	☐ Metal					
☐ Attic ☐ Roof	Factory built					
Basement	Masonry Lined					
Location of appliance:	Type of Chimney:					
Installer's name and address Pine State Plums.	Telephone 207-321-2261					
10-71-cl ME 01101	Heding The POB 6308 Scalingh ME					
Name and address of owner of appliance	ye 45 Turner St.					
Location / CBL St Turner St 14- H.	5 Use of Building Res Date 3-23 09					

City of Portland, Maine - Building or Use Permit 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-				Permit No: 09-0230	Date Applied For: 03/24/2009	CBL: 014 H015001	
Location of Construction:	Owner Name:		Owner Address:			Phone:	
45 TURNER ST	HAGGE CYRUS Y &	PATRICIA	A 2	225 COMMERCIA			
Business Name:	Contractor Name:		Contractor Address:			Phone	
	Pine State Plumbing &	_ [F	O Box 6308 Scarl	(207) 321-2261			
Lessee/Buyer's Name	Phone:		P	ermit Type:			
		}	L	HVAC			
Proposed Use: Proposed Project Description:							
2 unit residential - install a Buderus	6B142 direct vent boiler	ir	nstall a	a Buderus 6B142 direct vent boiler			
Dept: Zoning Status:	Approved with Condition	ns Revie	wer:	Tom Markley	Approval Da	te: 03/25/2009 Ok to Issue: ✓	
This is NOT an approval for an not limited to items such as stored.				•	al kitchen equipment		
This permit is being approved owork.	on the basis of plans submi	itted. Any o	deviati	ons shall require a	separate approval be	fore starting that	
Dept: Building Status:	Approved with Condition	ns Revie	wer:	Tom Markley	Approval Da	te: 03/25/2009	
Note:						Ok to Issue: 🗹	
1) The installation must comply w	ith the State of Maine Gas	Regulation	ıs.				
2) Application approval based upo and approval prior to work.	on information provided by	y applicant.	Any d	eviation from appr	oved plans requires s	separate review	

