•	line - Building or Use 101 Tel: (207) 874-8703		11	PFDIAIT in No: Issue Date 06-1004	SSUED CBL: 016 D006001		
Location of Construction:	Owner Name:			Owner Address			
94 ATLANTIC ST	WALSH EDW	WALSH EDWARD & KAREN M		147 DEEPWOOD DR			
Business Name:	Contractor Name	Contractor Name: Jiminos Plumbing &Heating		Contractor A Clear OF DADA Phote 1407 Riverside Street Portland / AMD 20/7973174			
	Jiminos Plumb						
Lessee/Buyer's Name	Phone:		Permit T HVA	уре:	Zone:		
Past Use:	Proposed Use:		Permit	Fee: Cost of Wor	k: CEO District:		
3 unit residential		3 unit residential - install a HB		\$110.00 \$9,00			
	Smith direct v basement		FIRE D		INSPECTION: Use Group: A A Type: 7/12/06		
Proposed Project Description: install a HB Smith direct	Signature: Creek, Creek, Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved w/Conditions Denie						
			Signatur	re:	Date:		
Permit Taken By:Date Applied For:ldobson07/10/2006		Zoning Approval					
1. This permit application	on does not preclude the	Special Zone or Revi	ews	Zoning Appeal	Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance	Not in District or Landmark		
	 Building permits do not include plumbing, septic or electrical work. 			Miscellaneous	Does Not Require Review		
 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 		Flood Zone		Conditional Use	Requires Review		
		Subdivision		Interpretation	Approved		
				Approved	Approved w/Conditions		
		Maj 🗌 Minor 🗍 MM	1	Denied	Denied		
		Date:	C	Date:	Date:		

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



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APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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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 94-98 AtlANTIC ST	Use of Building $\frac{2}{\sqrt{N}}$ $\frac{\sqrt{N}}{\sqrt{10}}$ Date $\frac{2}{10}/0.6$			
	SH 147 Deepword DRIVe			
Partinul MG 04103				
Installer's name and address JimiNO'T Plumbin	5 - Heating 1407 Riverside ST			
PortInuo ME 04103	Telephone			
Location of appliance:	Type of Chimney:			
Basement 🗆 Floor	Masonry Lined			
$\Box \text{ Attic} \qquad \Box \text{ Roof}$	Factory built			
Type of Fuel:	□ Metal			
Gas 🗆 Oil 🗆 Solid	Factory Built U.L. Listing #			
Appliance Name: HB SMith	Direct Vent			
U.L. Approved X Yes D No	Type UL#			
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank			
installation instructions? X Yes D No				
ξ Υ	Gas Charles Charles			
IF <u>NO</u> Explain:				
	Size of Tank			
The Type of License of Installer:	Number of Tanks			
Master Plumber #				
Solid Fuel #	Distance from Tank to Center of Flame $- O$ feet.			
Oil #				
□ Gas # PNT 1042	Cost of Work: $\frac{9000,00}{00}$			
• Other	Permit Fee: \$ // 0 00/00			
Approved	Approved with Conditions			
Fire:	See attached letter or requirement			
Fle	•			

Bldg.:	MAA		Inspe	Date Approved	
	White - Inspection	Yellow - File	Pink - Applicant's	Gold - Assessor's Copy	