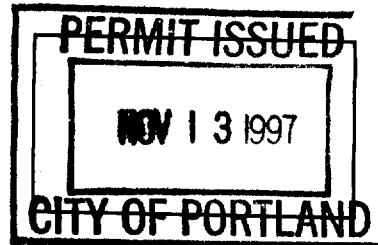


022-7-220



FILL IN AND SIGN WITH INK

971219



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 33 Smith St Use of Building 3-fam Date 10 Nov 97

Name and address of owner of appliance Scott Somoreau

Installer's name and address Wayne's P & H 158 St John St Ptld, ME 04102

Telephone 774-7849

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: WIEB McLAIN

U.L. Approved Yes No

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

IF NO Explain: _____

The Type of License of Installer:

- Master Plumber # _____
- Solid Fuel # 1008
- Oil # _____
- Gas # _____
- Other _____

Type of Chimney:

- Masonry Lined unlined
Factory built BACK 8x12
- Metal
Factory Built U.L. Listing # _____
- Direct Vent
Type _____ UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank 275 GAL.

Number of Tanks 3

Distance from Tank to Center of Flame 8 feet.

Replacement: 15.00

022-7-220

Approved

Fire: [Signature]

Ele.: [Signature]

Bldg.: [Signature]

Approved with Conditions

See attached letter or requirement

Signature of Installer Robert McLain

CITY OF PORTLAND, MAINE
MEMORANDUM

022-L-013

DATE:

CEL 02-L-13

TO: Bill Giroux - Zoning Administrator
FROM: Community Development Office/P.L.H.P. Program
Loan Officer
SUBJECT: Verification of Legal Number of Units

We presently have an application for Loan/Grant for rehabilitation at:

145 Anderson Street
(ADDRESS)

The Owner is Daniel & Susan Hall
(NAME)

The given number of units of the building is 3

Please verify whether the number of units given are legal under the Zoning/Building Ordinance.

YES the number of units are legal

NO the number of units are not presently legal. The present number of units is _____.

William H. [Signature]
SIGNED BY VERIFIER

Zoning Administrator
TITLE