

**City of Portland, Maine - Building or Use Permit Application**

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

**PERMIT ISSUED**

Issue Date:  
**FEB 7 2003**

**CITY OF PORTLAND**

Permit No: 03-0076      CBL: 026 K004001

Location of Construction: 51 Myrtle St	Owner Name: Harris Richard S	Owner Address: 35 Penrith Rd	Phone:
Business Name: n/a	Contractor Name: Darling Plumbing & Heating	Contractor Address: Portland	Phone:
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone:

Past Use: Two Family Apartment Apartment #2	Proposed Use: Two Family Apartment / Install Rinnai gas Heater	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Install Heating System		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>[Signature]</i>		INSPECTION: <i>R-B</i> Use Group: <i>Heating</i> Type: Signature: <i>[Signature]</i>
		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: gg	Date Applied For: 02/03/2003	<b>Zoning Approval</b>
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.  2. Building permits do not include plumbing, septic or electrical work.  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..	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: _____	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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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

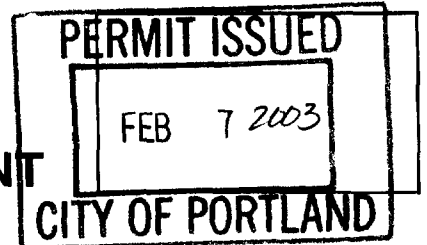
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7/7/05 Done



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



0265004

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 Sl Myrtle St Use of Building Apt #2 Date 2/3/03

Name and address of owner of appliance Spring St West

Installer's name and address Darling Plumbing & Heat Inc 27 Varnish Ave Portland, ME 04103 Telephone 207-773-9525

**Location of appliance:**

Basement       Floor  
 Attic             Roof

**Type of Fuel:**

Gas       Oil       Solid

**Appliance Name:** Rinnai

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 # \_\_\_\_\_  
 Oil # \_\_\_\_\_  
 Gas # 473  
 Other \_\_\_\_\_

**Type of Chimney:**

Masonry Lined  
Factory built \_\_\_\_\_

Metal  
Factory Built U.L. Listing # \_\_\_\_\_

Direct Vent  
Type \_\_\_\_\_ UL# \_\_\_\_\_

**Type of Fuel Tank**

Oil  
 Gas

Size of Tank \_\_\_\_\_

Number of Tanks \_\_\_\_\_

Distance from Tank to Center of Flame \_\_\_\_\_ feet.

30.00

**Approved**

**Approved with Conditions**

See attached letter or requirement

Fire: \_\_\_\_\_  
Ele.: \_\_\_\_\_  
Bldg.: \_\_\_\_\_

Signature of Installer [Handwritten Signature]