| City of Portland, Ma | ine - Buil | ding or Use | Permi | t Application | n Permit | No: | Issue Date | : | CBL: | | |
|---|---------------------------------|--------------------------------------|----------------------------|----------------------|------------------------------|------------------------------------|-------------|-------------------------|----------------------------|--------------|--|
| 389 Congress Street, 04 | | • | | | | 08-0448 | | | 027 C |)1007W | |
| Location of Construction: Owner Name: | | | | | Owner Ad | Owner Address: | | | Phone: | | |
| 21 CHESTNUT ST SAWYER NA | | | NCY C | NCY C 21 CHESTNUT ST | | | ST # 7W | | | | |
| Business Name: | | Contractor Name: | | | Contracto | r Address: | | | Phone | | |
| | | Nathan Leavitt | | | 223 Old Orchard Road Buxton | | | on | 2073292 | 129 | |
| Lessee/Buyer's Name | | Phone: | | | Permit Ty | pe: | | | Zone: | | |
| | | | | | HVAC | | | | | 15- | |
| Past Use: | | Proposed Use: | Permit Fee: Cost of Work: | | | | rk: | CEO District: | | | |
| Residential Condo Unit - | | Residential Co | ondo Unit - Install | | \$30.00 \$375.0 | | 75.00 | 00 1 | | | |
| | | HearthStone C | ast Iron Stove | | FIRE DEPT: Approved | | INSPECTION: | | | | |
| | fi. | | | | 1 | Denied U | | Use Gr | se Group: Type://// | | |
| chestout Street (| at 15 | ~ | + ~ | - , | 1541 | () | _ Denieu | | 266/2012 | | |
| legaluse: 37 Fas | idential | Condos wi | 14 G | mnexial | m 1=4 | tool | | 1 | MITE CA | us re | |
| Proposed Project Description: | | | | | 1 | , , | • | | -11 | 7 | |
| Install HearthStone Cast | Iron Stove | | | | Signature Signat | | | Signatu | | | |
| | | | | | PEDESTRIAN ACTIVITIES DISTRI | | | TRICT (I | CT (P,A.Dd | | |
| | | | | | Action: | Approv | ved Ap | proved w | /Conditions | Denied | |
| | | | | | | | | | | | |
| | | | | | Signature | | | | Date: | | |
| Permit Taken By: | | oplied For: | | | Zoning Approval | | | | | | |
| lmd | | 2/2008 | | | | | | | | | |
| 1. This permit application | | | Special Zone or Review | | ews | vs Zoning Appeal | | | Historic Preservation | | |
| Applicant(s) from meeting applicable State and Federal Rules. | | | ☐ Shoreland | | | Variance | | | Not in District or Landman | | |
| 2. Building permits do not include plumbing, septic or electrical work. | | | □ w | etland | Miscellaneous | | | Does Not Require Review | | | |
| 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 | | | ☐ Flood Zone ☐ Subdivision | | | ☐ Conditional Use ☐ Interpretation | | | Requires Review Approved | | |
| | | | | | | | | | | | |
| | | | ☐ Si | te Plan | | Approve | ed | | Approved w | /Conditions | |
| | | | Maj [| Minor MM | | Denied | | | Denied | | |
| PERM | AIT ISSU | ED | Date: | 3/5/09 | Da | ite: | | D | ate: | | |
| I hereby certify that I am the I have been authorized by | PORTL ne owner of the owner to | AND record of the na make this appli | med pro | as his authorize | he proposo d agent an | d I agree | to conform | to all ap | pplicable laws | of this | |
| jurisdiction. In addition, if shall have the authority to such permit. | | | | nit at any reason | nable hour | | the prov | ision of | the code(s) ap | oplicable to | |
| SIGNATURE OF APPLICANT | ADDRESS | | | | DATE | | PHONE | | | | |
| | | | | | | | | | | | |
| RESPONSIBLE PERSON IN CI | HARGE OF W | ORK TITLE | | | | | DATE | | | ONE. | |

| City of Portland, Mai | ine - Building or Use Permit | | Permit No: | Date Applied For: | CBL: | | | |
|----------------------------|---|-------------------|---------------------------|------------------------|---------------------------------|--|--|--|
| 389 Congress Street, 041 | 01 Tel: (207) 874-8703, Fax: (207) | 7) 874-8716 | 08-0448 | 05/02/2008 | 027 C01007W | | | |
| Location of Construction: | Owner Name: | 0 | Owner Address: Phone: | | | | | |
| 21 CHESTNUT ST | SAWYER NANCY C | 2 | 21 CHESTNUT ST # 7W | | | | | |
| Business Name: | Contractor Name: | C | Contractor Address: Phone | | | | | |
| | 2 | 223 Old Orchard F | Road Buxton | (207) 329-2129 | | | | |
| Lessee/Buyer's Name | Phone: | Pe | | | | | | |
| | | | | | | | | |
| Proposed Use: | | Proposed | Project Description: | | | | | |
| Residential Condo Unit - I | nstall HearthStone Cast Iron Stove | Install | HearthStone Cast | Iron Stove | | | | |
| Dept: Zoning Note: | Status: Approved | Reviewer: | Marge Schmucka | Approval I | Oate: 05/05/2008 Ok to Issue: | | | |
| Dept: Building Note: | Status: Approved with Conditions | Reviewer: | Tammy Munson | Approval I | Oate: 05/12/2008 Ok to Issue: ✓ | | | |
| 1) This appliance shall be | e installed, operated and maintained pe | r the manufac | turers specificatio | ns | | | | |
| 2) The heating appliance | stove shall be installed, maintained an | d operated in | accordance with the | he terms of the listir | ng. | | | |
| , , , , , , | comply with the State of Maine Gas Re | • | | | | | | |
| Dept: Fire | Status: Approved with Conditions | Reviewer: | Capt Greg Cass | Approval I | Oate: 05/09/2008 Ok to Issue: ✓ | | | |

1) Venting per manufactors specification.

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

| 27 | C01007W |
|----|---------|
| | |
| | |
| | |

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

| | The unde | ersigned h | ereby appl | ies for a | permit t | o install | the follo | owing hea | iting, co | oking or p | power (| equipment | in |
|--------|------------|------------|------------|-----------|----------|-----------|-----------|-----------|-----------|------------|---------|------------|----|
| accord | dance with | the Laws | of Maine, | the Buil | ding Cod | de of the | City of I | Portland. | and the | following | specii | fications: | |

| Location/CBL Chestart st Lofts | Use of Building 1 partiest Date 5/2/03 Apt · Chestwot · Street · Lofts | | | | | | |
|--|---|--|--|--|--|--|--|
| Name and address of owner of appliance Man Sawyer | Apt · Chestaut · Street · Loffs portland | | | | | | |
| Installer's name and address Mathan leavitt 223 | | | | | | | |
| | | | | | | | |
| Location of appliance: | Type of Chimney: | | | | | | |
| ☐ Basement ☐ Floor | ☐ Masonry Lined | | | | | | |
| ☐ Attic ☐ Roof | Factory built | | | | | | |
| Type of Fuel: | ☐ Metal | | | | | | |
| 🕱 Gas 🗅 Oil 🗅 Solid | Factory Built U.L. Listing # | | | | | | |
| Appliance Name: Stoire | Direct Vent | | | | | | |
| U.L. Approved Yes No | Type UL# | | | | | | |
| Will appliance be installed in accordance with the manufacture's installation instructions? Yes No | Type of Fuel Tank ☐ Oil | | | | | | |
| • | ☐ Gas | | | | | | |
| IF NO Explain: | S'- CT 1 | | | | | | |
| The Type of License of Installer $\frac{1}{4}$ AY -2 2003 | Size of Tank Number of Tanks | | | | | | |
| ☐ Master Plumber # | | | | | | | |
| □ Solid Fuel # | Distance from Tank to Center of Flame feet. | | | | | | |
| Oil # | Cost of Work: \$375. *** | | | | | | |
| Gas # | | | | | | | |
| U Ottlet | Permit Fee: \$ | | | | | | |
| Approved | Approved with Conditions | | | | | | |
| Fire: | ☐ See attached letter or requirement | | | | | | |
| Ele.: | | | | | | | |
| Bldg.: | | | | | | | |
| | Inspector's Signature Date Approved | | | | | | |
| Signature of Installer . | | | | | | | |
| White - Inspection Yellow - File | Pink - Applicant's Gold - Assessor's Copy | | | | | | |