

**City of Portland, Maine - Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>292 Congress Street</b>		Owner: <b>Oak Leaf Terrace Co.</b>	Phone:	Permit No: <b>991035</b>
Owner Address:		Lessee/Buyer's Name:	Phone:	Business Name:
Contractor Name: <b>** Nelson &amp; Small Inc. David R. Fortin</b>		Address: <b>212 Canco Road, Ftld, ME 04104</b>		Phone:
Past Use: <b>Laundromat</b>	Proposed Use: <b>Same</b>	COST OF WORK: <b>\$ 6,000</b>	PERMIT FEE: <b>\$ 60.00</b>	<b>Permit Issued:</b> <b>PERMIT ISSUED</b> <b>SEP 24 1999</b> <i>12812-003</i> <b>Zone: FC PORTLAND</b>
		FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	
Proposed Project Description: <b>Equipment replacement - addition of 2 tanning rooms only.</b>		Signature: <i>W...</i>		
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval: <i>9/12/99</i>
Permit Taken By: <b>UB</b>		Date Applied For: <b>9-15-99</b>		<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
		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		<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
		Signature: _____ Date: _____		<b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review

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..

**\*\*\*Send To: David R. Fortin  
Nelson & Small Inc.  
212 Canco Road  
Portland, ME 04104**

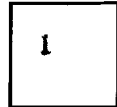
**PERMIT ISSUED  
WITH REQUIREMENTS**

**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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT	ADDRESS:	DATE: <b>9-15-99</b>	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

**CEO DISTRICT**



COMMENTS

12/6/99 Work Completed all OK (DC)

CBL# 28-D-3

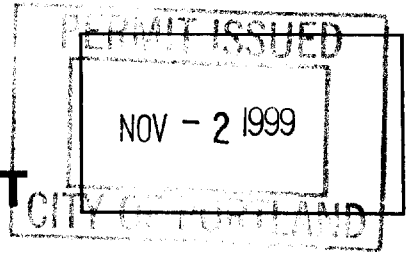
Permit# 991035

Type	Inspection Record	Date
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	(DC)	12/6/99
Other:	_____	_____



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



991207

CBL 028-D-003

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 292 Congress Street Use of Building Laundry Mat Date 10/28/99  
 Name and address of owner of appliance Lookin Good Laundromat / Nelson & Small  
292 Congress Street  
 Installer's name and address William Lewis Jr  
1630 Forest Ave Portland Me Telephone 578-2212

### Location of appliance:

- Basement
- Floor
- Attic
- Roof
- ceiling mount

### Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Modular (gas unit heater)

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 # PNT 337
- 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.

Cost of work - \$1,000.00

Fee - \$30.00

Approved

Fire: [Signature]

Ele.: \_\_\_\_\_

Bldg.: [Signature]

Approved with Conditions

See attached letter or requirement

Signature of Installer William Lewis Jr

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