

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

<b>PERMIT ISSUED</b>		CBL:
Permit No: 02-0148	Issue Date: FEB 16 2002	036 G008001

<b>Location of Construction:</b> 241 High St	<b>Owner Name:</b> Parkside Properties Llc	<b>Owner Address:</b> Po Box 641	<b>Phone:</b>
<b>Business Name:</b> n/a	<b>Contractor Name:</b> Charlie Barnham Heating	<b>Contractor Address:</b> PO Box 382 Freeport	<b>Phone:</b> 2078659010
<b>Lessee/Buyer's Name:</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Past Use:</b> Multi Family	<b>Proposed Use:</b> Multi Family / Install Peerless EC 275 gallon oil tank	<b>Permit Fee:</b> \$30.00	<b>Cost of Work:</b> \$0.00	<b>CEO District:</b> 2
		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: <i>22</i> Type:	

**Proposed Project Description:**  
Install Heating System

Signature: *[Signature]* Signature: *T. Wilson*

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**  
 Action:  Approved  N/A  Approved w/Conditions  Denied  
 Signature: *[Signature]* Date:

<b>Permit Taken By:</b> gg	<b>Date Applied For:</b> 02/19/2002	<b>Zoning Approval</b>
-------------------------------	--	------------------------

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:
	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>

**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



FILL IN AND SIGN WITH INK

02 014

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

**PERMIT ISSUED**  
FEB 26 2002  
CITY OF PORTLAND

036 6008

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 241 High Use of Building Multi Em. Bldg Date 2/18/02  
Name and address of owner of appliance William Simpson

Installer's name and address Charlie Baruchon Heating Services  
PO Box 382 Sacoport ME Telephone 865 9010 \* \* \* Call

**Location of appliance:**  
 Basement  Floor  
 Attic  Roof

**Type of Fuel:**  
 Gas  Oil  Solid

**Appliance Name:** Peerless EC  
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 # 2670  
 Gas # \_\_\_\_\_  
 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** 2.75

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

**Distance from Tank to Center of Flame** 10 feet.

\$30.00

**Approved**

**Approved with Conditions**

See attached letter of requirement

Fire: [Signature]  
Ele.: \_\_\_\_\_  
Bldg.: \_\_\_\_\_

FEB 19 2002

**Signature of Installer** [Signature]

White - Inspection    Yellow - File    Pink - Applicant's    Gold - Assessor's Copy