City of Portland, Ma		_			KI " " "	mit No:	Issue Date	:	CBL:	
389 Congress Street, 04	101 Tel: (2	207) 874-8703	, Fax:	(207) 874-871	6	03-1379			044 B	023001
Location of Construction:	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				Owner Address:				Phone:	
41 State St		Casco Terrace		One Longfellow Sq						
Business Name: Contractor Nam		-		Contractor Address:			Phone			
		mbing & Heating		PO Box 6308 Scarborough			2078831200			
Lessee/Buyer's Name Phone:					Permit Type:				Zone:	
NA NA			HVAC				<u> </u> C29			
Past Use: Commercial/ Warehouse Install Gas he Basement		-			Permit Fee: Cost of Work:				CEO District:	
		ating system in		Appioved		INSPE	PECTION: c Group: Type: 5			
Proposed Project Description: Install Gas heating system in Basement									ignature: U 3	
					Action			•	/Conditions	Denied
Down to Training Day	I5 A	11 - 3 17	Ţ		Signat				Date:	•,
Permit Taken By: ldobson	10/31/	plied For:			Zoning Approval					
	<u> </u>	 	Sne	cial Zone or Revie	we I	Zoni	ng Appeal		Historic Pre	servation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		, w b	☐ Variance			Not in District or Landmar		
Building permits do not include plumbing, septic or electrical work.			☐ Wetland			☐ Miscellaneous			Does Not Require Review	
3. Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zone			Conditional Use			Requires Review	
False information may invalidate a building permit and stop all work		Subdivision		☐ Interpretation			Approved			
			☐ Sid	e Plan		Approve	ed .		Approved w	/Conditions
			Maj [Minor MM		Denied			Denied	facion a
			Date:	11/13/	07	Date:		D	ate: Veg	west
				•					Seps	~~\~
			C	ERTIFICATI	ON					
I hereby certify that I am the I have been authorized by the jurisdiction. In addition, if shall have the authority to essuch permit.	the owner to a permit for	make this appli work described	ication a d in the	s his authorized application is is	d agent ssued, I	and I agree certify that	to conform the code of	to all ap ficial's a	pplicable laws	of this presentative
SIGNATURE OF APPLICANT			ADDRESS		S	DATE		,	PHONE	
RESPONSIBLE PERSON IN CI	HARGE OF WO	ORK. TITLE					DATE		DU/	ONE

DATE

PHONE



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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To the INSPECTOR OF BUILDINGS, PORTLAND, ME. The undersigned hereby applies for a permit to insta accordance with the Laws of Maine, the Building Code of the	OHY BOZZ tall the following heating, cooking or power equipment in the City of Portland, and the following specifications:				
Name and address of owner of appliance CASCO TERRA	Use of Building APTS. Date 10-21-03 CE 41 STATE ST. CORTLAND				
Installer's name and address PINE STATE PEH 5 INDUSTRY ED. SO. PORTLAND					
Location of appliance: Basement	Type of Chimney: Masonry Lined Factory built				
Type of Fuel: Gas Oil Solid PATTERSON Appliance Name: KELLY MODEL SN-1000 U.L. Approved Q Yes Q No	Metal Factory Built U.L. Listing # Direct Vent Type UL#				
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No IF NO Explain:	Type of Fuel Tank Oil Gas Size of Tank				
The Type of License of Installer: Master Plumber # Solid Fuel # Oil # Gas # PNT 1197	Number of Tanks Distance from Tank to Center of Flame feet. Cost of Work: \$ 75,000.00 PEPT, OF BUILDING INSPECTION 96.00				
Approved Fire:	Inspector's Signature Date Approved				
White - Inspection Yellow - File P	ink - Applicant's Gold - Assessor's Copy				