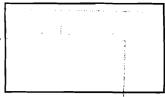
•	_	Use Permit Applicatio 8703, Fax: (207) 874-87		issue Date:	048 B007001
Location of Construction:	Owner Nar		Owner Address:	<u> </u>	Phone:
76 PARK AVE		DE APARTMENTS LLC	757 CONGRESS ST		207-883-4060
Business Name:	Contractor		Contractor Address:		Phone
	Joe Henr	ikson	1 Henrikson Raod	Scarborough	
Lessee/Buyer's Name	Phone:		Permit Type:	·	Zone:
			HVAC		K &
Past Use: Proposed Use:		Jse:	Permit Fee: Cost of Work: CEO District:		
Commercial	Commerc	cial - Install Lears Mascot	\$420.00	\$40,000.00	2
	Direct V	ent Gas Burner	FIRE DEPT:	Approved INSPECT	rion:
				Denied Use Grou	p: Type:
1 . 1	six resider	121 - 11			MIAC
		WARC D.U			SUA 1
Proposed Project Descripti				$\cap$	All -
Install Lears Mascot D	rrect vent Gas Burner		Signature Signat		
			<u> </u>	·	/\ ·
			Action: Approve	ed Approved w/C	onditions Denied
			Signature:	Ι	Date:
Permit Taken By:	Permit Taken By: Date Applied For: Zoning Approval				
lmd	10/28/2008				
1. This permit applic	ation does not preclude th	ne Special Zone or Rev	iews Zonin	g Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.		and Shoreland	☐ Variance	Į ų	Not in District or Landmark
2. Building permits do not include plumbing, septic or electrical work.		☐ Wetland	☐ Miscellar	neous	Does Not Require Review
3. Building permits a	are void if work is not star		Condition	nal Use	Requires Review
False information may invalidate a building permit and stop all work			☐ Interpreta	ition	Approved
		Site Plan	Approved	ı	Approved w/Conditions
	· · · · · · · · · · · · · · · · · · ·	Mai □ Minor □ MN	⊿ ☐ Denied		Denied
				-	J Deilled
		Date:	PATE Date:	Date	
		10/	29/09		
		l diller			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Grand Control of the
	Carrier and Carrie				
					37 37 37
		CERTIFICAT		The special fig.	. É
		he named property, or that application as his authorized			
jurisdiction. In addition	n, if a permit for work des	cribed in the application is	issued, I certify that the	he code official's au	thorized representative
	to enter all areas covered	by such permit at any reason	onable hour to enforce	the provision of the	e code(s) applicable to
such permit.					
SIGNATURE OF APPLICA	NT	ADDRES	SS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE				DATE	PHONE



## APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



049.B-007

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.  The undersigned hereby applies for a permit to insta	all the following heating, cooking or power equipment in
accordance with the Laws of Maine, the Building Code of the	
Location / CBL 76 Park Ave  Name and address of owner of appliance Greg Johnson	Use of Building AP+ Date 10-28-0
Installer's name and address Joe Henritcon	/ Henritsan Rd Sonsborough Me Telephone 883 4060
Location of appliance:  Basement Roof	Type of Chimney:  Masonry Lined Factory built
Type of Fuel:  Gas Oil Settid 2 8 2003	☐ Metal Factory Built U.L. Listing #
Appliance Name: Jours Masot  U.L. Approved Yes No	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  Gas  Size of Tank
The Type of License of Installer:  Master Plumber #	Number of Tanks  Distance from Tank to Center of Flame feet.  Cost of Work: \$ \( \frac{40}{20} \)  Permit Fee: \$ \( \frac{40}{20} \) -
Approved  Fire: Ele.:	Approved with Conditions  See attached letter or requirement
Bldg.:	Inspector's Signature Date Approved

Wibite - Inspection

**Signature of Installer** 

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy