

CITY OF PORTLAND, MAINE

Department of Building Inspections

		Dave	<u> </u>
Received from	Peter M) \)
Location of Work	1945	Congre	ss St.
Cost of Construction Permit Fee	-		
Building (IL) X P		Electrical (12)	_ Site Plan (U2)
CBL: 216 A	006	Total Calle	octed s 35.00
Check #:		IUMI COR	Tied 5 33 00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premiser. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be tranted the amount of the fee will be refunded upon return of the sceipt less \$10.00 or 10% whichever is greater.

HITE - Applicant's Copy ELLOW - Office Copy MK - Permit Copy

City of Portland, Mai	no - Ruilding on Usa	Permit Applicati	Permit No:	PERMIT ISS	CBL:	
389 Congress Street, 041	_		02.0551		054 E006001	
ocation of Construction:	Owner Name:	<u>, </u>	Owner Address:	JUL 9 1 7	Phone:	
258 Vaughan St	Courtois Lela	nd B	55 Montrose Ave	··· *~ 50	,	
Business Name:	Contractor Nam		Contractor Address		Phone	
	Dead River C		PO Box 467 Scar	borough	2078839515	
essee/Buyer's Name	Phone:		Permit Type:		Zone:	
			HVAC		<u> </u>	
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:	
Multi Family/3 Units	Multi Family/	3 Units	\$30.00 \$4,560.00 3			
			FIRE DEPT:] Whinsen	ECTION:	
				Denied Use (Group: 2 Type: 5	
LAMUCO! 3	Land O. Mine	Lab.			-11/2	
roposed Project Description:	Mingag was	ofesce	_		~///A	
Install Oil Heating System	in hasement/330 Gallon T	nk	Signature:	NW Signa	(1)(1 K)	
mount on Heating Bystelli	m ogsemente por Ognon 1.	ALL IN	PEDESTRIAN ACTI			
			Action: Approv	ved Approved	w/Conditions Denied	
·			Signature:		Date:	
ermit Taken By:	Date Applied For:		Zoning	Approval		
gad	06/25/2003					
	n does not preclude the ting applicable State and	Special Zone or Re	views Zonin	ng Appeal	Historic Preservation Not in District or Land	
2. Building permits do no		Wetland The # of	Dwell Miscella	neous	Does Not Require Revi	
	oid if work is not started	☐ Flood Zone	Condition	mal Use	Requires Review	
within six (6) months of False information may permit and stop all wor	invalidate a building	☐ Subdivision	Interpred	ation	☐ Approved	
		Site Plan	☐ Approve	d	Approved w/Condition	
		Maj Minor N	• Denied		Denied Amortano	
		Date: OK-J	7102 Date:		Date: M Sc Dan ST	
			///		Towns	
		OND THE STATE OF T	DION.			
hereby certify that I am the have been authorized by the trisdiction. In addition, if a hall have the authority to en ach permit.	e owner to make this apple a permit for work describe	cation as his authorial in the application is	t the proposed work is zed agent and I agree s issued, I certify that	to conform to all a the code official's	applicable laws of this authorized representati	
IGNATURE OF APPLICANT		ADDR		DATE	PHONE	

RESPONSIBLE FERSON IN CHARGE OF WORK, TITLE

PHONE

DATE



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

₹ 03-0751

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.	054-E-006
0 , 11 , 1	all the following heating, cooking or power equipment in
accordance with the Laws of Maine, the Building Code of the	he City of Portland, and the following specifications:
Location / CBL 258 VAVGHN 57.	Use of Building RES Date 6/25/03
Name and address of owner of appliance	OURTOIS
55 MONT	ROSE AUE FORTLAND, MF.
Installer's name and address	
73 PLEASANT	HILL Belephone 883-5921
SOYRBOR	<u> </u>
Location of appliance:	Type of Chimney:
Basement	Masonry Lined
☐ Attic ☐ Roof	Factory built
Type of Fuel:	☐ Metal
☐ Gas ☐ Oil ☐ Solid	Factory Built U.L. Listing #
77	
Appliance Name: PEERLESS ECOY BONER	☐ Direct Vent
U.L. Approved Yes No	Type UL#
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank
installation instructions? Yes No	Oil
	☐ Gas
IF NO Explain:	772
	Size of Tank
-	
The Type of License of Installer:	Number of Tanks
☐ Master Plumber #	
☐ Solid Fuel #	Distance from Tank to Center of Flame feet.
oil # MS 2000 60 V7	
Gas #	Cost of Work: \$ 4560.00
☐ Other	Permit Fee: \$ 30.00
	A d with Conditions
Approved	Approved with Conditions
Fire:	See attached letteperrequipment
Ele.:	The state of the s
Bldg.:	Inspector's Signature JUN 2 5Date Approved
1 All Asiat	2 3-2003
Signature of Installer	The state of the s

White - Inspection

Yellow - File

Pink - Applicant's Gold - Assessor's Copy

City of Portland, Main	e - Building or Use	Permit Applicati	on F	ermit No:	Issue Date:	1	CBL:	
89 Congress Street, 0410	_		- 1	03-0751			054 E0	06001
ocation of Construction: Owner Name:				Owner Address:			Phone:	
58 Vaughan St	Courtois Lela	Courtois Leland B						
ısiness Name:	e:		Contractor Address:			Phone		
	Dead River C	отрапу	PO	Box 467 Scar	borough		20788395	15
essee/Buyer's Name	Phone:	Phone:			Permit Type: HVAC			Zone:
st Use:	Proposed Use:	Proposed Use:			Permit Fee: Cost of Work:			
fulti Family/3 Units	Multi Family/	ılti Family/3 Units		\$30.00 \$4,560.0		0.00	3	
Proposed Project Description: Install Oil Heating System in basement/330 Gallon Tank			Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				Type: 5	
			Acti	on: Approv	ed [] App		Conditions [Denied
rmit Taken By:	Date Applied For: 06/25/2003	Zoning Approva				l		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Rev	iews	Zonin	g Appeal		Historic Prese	rvation
		Not to m	-enci	Variance			Not in Distric	t or Landm
Building permits do not include plumbing, septic or electrical work.		Wetland The For I)wcl	Miscellar	neous		Does Not Req	uire Reviev
Building permits are voice within six (6) months of t	he date of issuance.	Flood Zone	,	Condition	nal Use		Requires Revi	ew
False information may in permit and stop all work.		Subdivision		☐ Interpreta	ation		Approved	
		Site Plan		Approved	i		Approved w/C	Conditions
		Maj Minor Ne	2	· Denied		A	Denied A	ارتواد
		Date:	1/02	Date:		Date	KSep.	NATE
		-	-		٠		(erce	نعا
		CERTIFICAT	ION					
nereby certify that I am the or nave been authorized by the or risdiction. In addition, if a prall have the authority to enter ch permit.	owner to make this appliermit for work described	cation as his authorized in the application is	ed agen issued,	it and I agree to I certify that the	o conform to he code offic	all app cial's au	licable laws o thorized repre	f this sentative

ADDRESS

DATE

PHONE

SIGNATURE OF APPLICANT

City of Portland, Ma	ine - Building or Use	Permit Application		Issue Date:	CBL:		
389 Congress Street, 04	02 0751	1 02 0751					
Location of Construction:	Owner Name:		Owner Address:	Phone:			
258 Vaughan St	Courtois Lelai	nd B	55 Montrose Av	<u></u>			
Business Name:	Contractor Name		Contractor Address:				
	Dead River Co	ompany	PO Box 467 Sca	ırborough	2078839515		
Lessee/Buyer's Name	Phone:	Phone:		Permit Type: HVAC			
Past Use:	Proposed Use:		Permit Fee:	CEO District:			
Multi Family/3 Units	Multi Family/	3 Units	\$30.00	\$4,560.00) 3		
Proposed Project Description: Install Oil Heating System in basement/330 Gallon Tan		rofiche	Signature:	Denied Use Sign TVITIES DISTRICT			
			Signature:		Date:		
Permit Taken By:	Date Applied For: 06/25/2003		Zoning Approval				
gad		Special Zone or Revi	iews Zon	ing Appeal	Historic Preservation		
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 		Shoreland Not to m	Variano		Not in District or Landmar		
2. Building permits do n septic or electrical wo		Wetland of I	well Miscell	laneous	Does Not Require Review		
	of the date of issuance.	Flood Zone	Conditi	onal Use	Requires Review		
False information may permit and stop all wo		Subdivision	☐ Interpre	etation	Approved		
		Site Plan	Approv	ed.	Approved w/Conditions		
		Maj Minor Max	Denied		Denied Levi of F		
	l	Date: 4	Joseph Date.		Terrew		
I hereby certify that I am th	e owner of record of the nar	Date: OK 7/7		s authorized by th	Date: A Separate Terricus the owner of record and that		
I have been authorized by the jurisdiction. In addition, if	he owner to make this applie a permit for work described inter all areas covered by su	cation as his authorize in the application is i	d agent and I agree ssued, I certify that	to conform to all the code official's	applicable laws of this sauthorized representative		

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

SIGNATURE OF APPLICANT

ADDRESS

DATE

PHONE

DATE PHONE

•		uilding or Use Permit : (207) 874-8703, Fax: (Permit No: 03-0751	Date Applied For: 06/25/2003	CBL: 054 E006001	
Location of Construction		Owner Name:		Owner Address:		Phone:
			55 Montrose Ave			
Business Name:	-	Contractor Name:		Contractor Address:	Phone	
		Dead River Company	ad River Company		PO Box 467 Scarborough	
Lessee/Buyer's Name		Phone:		Permit Type:		
				HVAC		
Proposed Use:			Propose	d Project Description	<u> </u>	
Multi Family/3 Units			Install	Oil Heating Syste	m in basement/330	Gallon Tank
	_	3331			<u></u>	2000000
Dept: Zoning	Status:	Approved	Reviewer:	Marge Schmuck	al Approval l	Date: 07/07/2003
Note: to remain th				-		Ok to Issue:
Dept: Building	Status:	Approved	Reviewer:	Mike Nugent	Approval l	Date: 07/18/2003
Note:						Ok to Issue: 🗹
Dept: Fire	Status:	Approved	Reviewer	Lt. MacDougal	Approval l	
Dept: Fire Note:	Status:	Approved	Reviewer:	Lt. MacDougal	Approval l	Date: 07/0