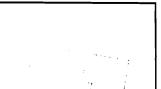
Scalark St Janice Hollis 95 Clark Street Phone Contractor Name: Contractor Name: Contractor Address: Phone 23 Brown Street Apt 302 Westbrook 2074500784	389 Congress Street, 04101 Tel: (207) 874-8703 Location of Construction: Owner Name:					Owner Address:			9 057 D019001 Phone:		
Past Contractor Name: Contractor Address: 23 Brown Street Apt 302 Westbrook Past 2074500784										I MUHC.	
LesterBuyer's Name	Business Name:		Contractor Name			↓				Phone	
Proposed Project Description: Install Trinity gas tank on the first floor. Permit Takes By:			Jeff Davis						stbrool	i	784
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Permit Taken By: Signature Date Date										α	
Action: Approved Approved w/Conditions Denied	Install Trinity gas tank	on the first flo	or.							$\overline{}$	
Signature: Date: Date:						PEDE	STRIAN ACTI	VITIES DIST	TRICT (P.A.D.)	
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FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



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 / CBL 95 CLARK 57	Use of Building HOME Date 8-2-9
	Use of Building HOME Date 8-2-9 OLLIS 95 CLARIF ST
Installer's name and address JEFF DAUIS I	ROOMN ST WEST BROOM
instance s name and address	Telephone 450 0784
Location of appliance:	Type of Chimney:
☐ Basement ☐ Floor	☐ Masonry Lined
☐ Attic ☐ Roof	Factory built
Type of Fuel:	☐ Metal
Gas	Factory Built U.L. Listing #
Appliance Name: TRINITY	☐ 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	□ 9¥ AUG 1 4 2009
	Gas
IF NO Explain:	
	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 #	Cost of Works & U.S. C.C.
Gas # TNT 3563	Cost of Work: \$ 4500
Other	Permit Fee: \$
<u>Approved</u>	Approved with Conditions
	Approved with Conditions See attached letter or requirement
Fire:	See attached fetter of requirement
Ele.:	(1/kat) [] 8/24/69
Bldg.:	Inspector's Signature Date Approved
Signature of Installer	·
White - Inspection Yellow - File 1	Pink - Applicant's Gold - Assessor's Copy

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon
Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

X	Final inspection required at completion of work.					
your pro	• •	• •				
	ICATE OF OCCUPANICES MUST B PACE MAY BE OCCUPIED.	E ISSUED AND PAID FOR, BEFORE				
Signatu	re of Applicant/Designee	Date				
Signatu	re of Inspections Official	Date				
	Marie					
CBL: 05	7 D019001 Building Permit #: 09-0	0880				

City of Portland, Maine - Buil	ding or Use Permit	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716	09-0880	08/14/2009	057 D019001	
Location of Construction:	Owner Name:		Owner Address:	-	Phone:	
95 Clark St	Janice Hollis		95 Clark Street			
Business Name:	Contractor Name:		Contractor Address:	Phone		
	Jeff Davis		23 Brown Street A	(207) 450-0784		
Lessee/Buyer's Name	Phone:	1	Permit Type:			
			HVAC			
Proposed Use:		Propose	d Project Description:			
Single Family / Install Trinity gas tan	k on the first floor.	Install	Trinity gas tank on	the first floor.		
Dept: Zoning Status: A	pproved with Condition	s Reviewer:	Marge Schmucka	Approval Da	ate: 08/17/2009	
Note:			C		Ok to Issue:	
1) This is NOT an approval for an ac	dditional dwelling unit	You SHALL NO	T add any addition			
not limited to items such as stoves	_				t meraang, oat	
2) This property shall remain a singl approval.	e family dwelling. Any o	change of use sha	all require a separat	e permit application	for review and	
Dept: Building Status: A	pproved with Condition	s Reviewer:	Chris Hanson	Approval Da	ate: 08/24/2009	
Note:					Ok to Issue:	
1) Pessure relief valves must be pipe	d to a drain or a baseme	nt floor.				
2) The installation must comply with	the State of Maine Gas	Regulations.				

