

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

PERMIT ISSUED

Permit No: 02-130 DEC 21 2002 Issue Date: CBL: 057 J001001

Location of Construction: 226 Danforth St	Owner Name: Russo Joseph A &	Owner Address: 21 Deepwood Dr CITY OF PORTLAND	Phone:
Business Name: n/a	Contractor Name: Waynes Plumbing and Heating	Contractor Address: 158 St. John St Portland	Phone: 2077747849
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone: R6

Past Use: Residential / Three Family	Proposed Use: Three Family / Install gas heating system	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 3
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Proposed Project Description: Install Heating System	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R2 Type: Heating
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Signature: *[Signature]* Signature: *[Signature] 12/9/02*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 11/27/2002	Zoning Approval
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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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <i>N/A</i> <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: <i>12/9/02</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <i>N/A</i> <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: <i>12/9/02</i>	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <i>NA</i> <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>12/9/02</i>
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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

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMIT ISSUED
DEC 21 2002

057 5001

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 226 Danforth St Port 3rd FL Use of Building Res Date 11/27/02
 Name and address of owner of appliance ~~Joe Russo 21 Deep Woods Dr Port~~
Joe Russo 21 Deep Woods Dr Port
 Installer's name and address ~~Waynes Plumbing 158 St John St Port~~
Kenneth Curlew Telephone 8281396

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel:
 Gas Oil Solid

Appliance Name: Weil Mckean
 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 # _____
 Gas # POT 130
 Other _____

Type of Chimney:
 Masonry Lined
 Factory built _____
 Metal
 Factory Built U.L. Listing # _____
 Direct Vent Power vent
 Type Wile Mckean UL# _____

Type of Fuel Tank
 Oil
 Gas

Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame NA feet.

Approved
 Fire: 10/4/07
 Ele.: _____
 Bldg.: _____

Approved with Conditions
 See attached letter or requirement

Signature of Installer [Signature]