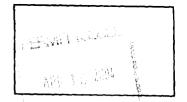
389 Congress Street, 04101	Tel: (207) 874-870	3, Fax: (207) 874-8	716	04-0360	in all lines in the lines in th		062 B0	18001
Lecation of Construction:	Owner Name:			Owner Address:		+ · /5//4	Phone:	
49 Neal St		Smiles Isabel W		49 Neal St			*	
Business Name:	1	Contractor Name:		Contractor Address:		PORTAG	Phone	
n/a		Provencher Fuels, Inc		39 Cleaves ST. Biddeford		ta na nakeniyesi e	2072848068	
Lessee/Buyer's Name		Phone:		Permit Type:			Zone:	
n/a	n/a		HV	'AC				
Past Use:	Proposed Use:	Proposed Use: Residential / Install one air handler in basement, exterior compressor.		nit Fee:	Cost of Work	c CEC	District:	7
Bed & Breakfast G				\$165.00 \$15,265.00			2	
	Samen		FIRE	✓ Approved			SPECTION: se Group: Type:	
(Pomegranita INN)					Denied	•		
Proposed Project Description:			_				4/18	y oy
Install one air handler in basem	ant autorian account						$\mathcal{O}(\mathcal{V})$,
mstati one air nandier in basem	ent, exterior compress	sor.		Signature: Signature				<u> []</u>
`*; *				PEDESTRIAN ACTIVITIES DISTRIC			L	
			}				ed w/Conditions Denied	
Permit Taken By:		Signa	Signature: Date:					
gg	Date Applied For: 04/06/2004			Zoning.	l			
1. This permit application doe	es not preclude the	Special Zone or Rev	views	Zoning	g Appeal	H	listoric Prese	rvation
Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work.		Shoreland No Changed Wetland use Allowed		1 Variance			Not in District or Landma	
				Miscellaneous			Does Not Require Review	
3. Building permits are void it within six (6) months of the	Flood Zone	Zone Conditional Use		_ F	Requires Review			
False information may inva permit and stop all work	False information may invalidate a building		Subdivision		Interpretation		Approved	
•		Site Plan		Approved			Approved w/C	onditions
		May Minor Mi	М	Denied			Denied	,
		Date: 4/13/0	4	Date:		Date:	(2:417)	ocA
		, 				Seps	Histo	Teview n ve
		CERTIFICAT	ION					
hereby certify that I am the own have been authorized by the own insdiction. In addition, if a permall have the authority to enter a uch permit.	ner to make this appli-	cation as his authorized in the application is	ed agent issued 1	and I agree to	conform to	all applica	ible laws of	fthis
GUNATURE OF APPLICANT	·	ADDRES	SS		DATE		PHONI	Ē
ESPONSIBLE PERSON IN CHARGE	OF WODY TITLE		 .					
	or monne, lile				DATE		PHOM	_

DATE

PHONE



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 49 Neal ST	Use of Building B/B Date $4/7/2004$
Name and address of owner of appliance ISARECLE SMIL	e /
49 NEAL ST PORTLAND	Me
Installer's name and address PROVENCHER FUELS	
139 CLEAVES ST BIDDEFURD OF	1005 Telephone 284-8068
Location of appliance: 1 air Condution en	Type of Chimney:
△ Basement □ Floor	☐ Masonry Lined
☐ Attic ☐ Roof AIR HANDLER IN CELLAR	Factory built
•	
Type of Fuel: COMPRESSOR ON PLOT PLAN	☐ Metal /
🖸 Gas 🚨 Oil 🗅 Solid	Factory Built U.L. Listing #
Appliance Name: UNICO	/
U.L. Approved Yes \(\sigma\) No	☐ Direct Vent
O.E. Approved & Its & Ito	TypeUL#
Will appliance be installed in accordance with the manufacture's	Thursday of Person Trees
installation instructions? Yes No	Type of Fuel Tank
100	☐ Oil ☐ Gas
IF NO Explain:	Gas
	Size of Tank
	Olec Or Talik
The Type of License of Installer:	Number of Tanks
☐ Master Plumber #	- Adding
Solid Fuel #	Distance from Tank to Center of Flame feet.
d Oil # M3 3000 1177	
Gas # PNT 4782	Cost of Work: 8 15, 265
Other	Permit Fee: 8 165.00
Approved	Approved with Conditions
Fire:	
Ele.:	See attached letter or requirement
Bldg.:	
Diug	Inspector's Signature Date Approved
Signature of Installer Kosen Trousenter	
White Inspection Valley File Bi-	

City of Portland, Maine - Bu	ilding on Has Down!	1	Permit No:	Date Applied For:	CBL:	
	ţ	04/06/2004	j			
389 Congress Street, 04101 Tel:	' L	04/00/2004	062 B018001			
Location of Construction:	}	Owner Address:		Phone:		
49 Neal St Smiles Isabel W			49 Neal St			
Business Name:	Countactor Name.		Contractor Address:	Phone		
n/a	Provencher Fuels, Inc		39 Cleaves ST. Bio	(207) 284-8068		
Lessee/Buyer's Name	Phone:		Permit Type:			
n/a	n/a		HVAC			
Proposed Use: Proposed Project Description:						
Bed & Breakfast with 6 guest rooms basement, exterior compressor.	n Install	Install one air handler in basement, exterior compressor.				
Dept: Zoning Status: A	Approved	Reviewer:	Marge Schmucka	* *	nte: 04/13/2004 Ok to Issue: ✓	
Dept: Building Status: A Note:	Approved	Reviewer:	Mike Nugent	Approval Da	nte: 04/14/2004 Ok to Issue: ✓	
Dept: Fire Status: A	Approved	Reviewer:	Lt. MacDougal	Approval Da	te: 04/08/2004 Ok to Issue: ✓	
Comments:						
4/7/2004-kwd: sent to Mac for review as MES is away. They began the job not realizing a permit was needed. Kwd						

City of Portland, Maine - Buil	ding or Use Permit		Permit No:	Date Applied For:	CBL:	
389 Congress Street, 04101 Tel: (874-8716	04-0360	04/06/2004	062 B018001	
Location of Construction: Owner Name:		C	Owner Address:		Phone:	
49 Neal St Smiles Isabel W		4	49 Neal St			
Business Name:	usiness Name: Contractor Name:		Contractor Address:	Phone		
n/a	Provencher Fuels, Inc		39 Cleaves ST. Bid	(207) 284-8068		
Lessee/Buyer's Name	Phone:		Permit Type:			
n/a	n/a		HVAC			
Proposed Use: Proposed Project Description:						
Bed & Breakfast with 6 guest rooms: basement, exterior compressor.	Install o	Install one air handler in basement, exterior compressor.				
Dept: Zoning Status: A Note:	pproved	Reviewer:	Marge Schmuckal		te: 04/13/2004 Ok to Issue: 🗹	
Dept: Building Status: A	pproved	Reviewer:	Mike Nugent	Approval Dat	te: 04/14/2004	
Note:			Trine Trugent		Ok to Issue:	
Dept: Fire Status: A	pproved	Reviewer:	Lt. MacDougal	Approval Dat	te: 04/08/2004	
Note:				(Ok to Issue: 🗹	
Comments: 4/7/2004-kwd: sent to Mac for review as MES is away. They began the job not realizing a permit was needed. Kwd						

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