

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1282	Issue Date: OCT 2005	ISSUED 063 G01 001
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Location of Construction: 151 PINE ST	Owner Name: THIRD SPACE LLC	Owner Address: PO BOX 7665	Phone: 207 284 8068
Business Name:	Contractor Name: Roger Provencher	Contractor Address: 139 Cleeves Street Biddeford	Phone: 207 284 8068
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Multi-Family	Proposed Use: Multi-Family/ Replacement boiler install a new weil Mclain	Permit Fee: \$273.00	Cost of Work: \$28,000.00	CEO District: 2
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied TO NFPA 31	INSPECTION: Use Group: <input checked="" type="checkbox"/> Type: HVAC IMC 2003	

Proposed Project Description:
Replacement boiler install a new weil Mclain

Signature: *[Signature]* 9-6-05
Signature: *[Signature]*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 09/02/2005	Zoning Approval	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p align="center">Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <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: _____	<p align="center">Zoning Appeal</p> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	<p align="center">Historic Preservation</p> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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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

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Lessee/Buyer's Name	Phone:

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Proposed Project Description:

Signature: *[Signature]* Date: 9-6-05
Signature: *[Signature]*
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 09/02/2005	Zoning Approval
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
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Special Zone or Reviews

Shoreland

Wetland

Flood Zone

Subdivision

Site Plan

Maj Minor MM

late: _____

Zoning Appeal

Variance

Miscellaneous

Conditional Use

Interpretation

Approved

Denied

late: _____

Historic Preservation

Not in District or Landmark

Does Not Require Review

Requires Review

Approved

Approved w/Conditions

Denied

late: _____

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

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389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1282	Date Applied For: 09/02/2005	CBL: 063 G011001
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Business Name:	Contractor Name: Roger Provencher	Contractor Address: 139 Cleeves Street Biddeford	Phone: (207) 284-8068
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Multi-Family/ Replacement boiler install a new weil Mclain	Proposed Project Description: Replacement boiler install a new weil Mclain
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Dept: Zoning **Status:** Approved **Reviewer:** Tammy Munson **Approval Date:** 09/30/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 09/30/2005
Note: **Ok to Issue:**

1) Installation shall comply with 2003 International Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 09/06/2005
Note: **Ok to Issue:**

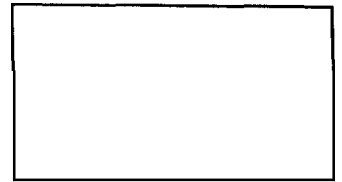
1) Installation to comply with NFPA 31

Fire



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 151 PINE ST. PORTLAND 03611 Use of Building RESIDENTIAL / RENTAL Date 9/2/2005
Name and address of owner of appliance LISA FOLEY 151 PINE ST PORT.

Installer's name and address ROGER PROVENCER 139 CLAVES ST BIDDEFORD Telephone 284-8068

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: WEIL McLAIN

U.L. Approved Yes No

Will appliance be installed in accordance with the manufacture's installation instructions? Yes No

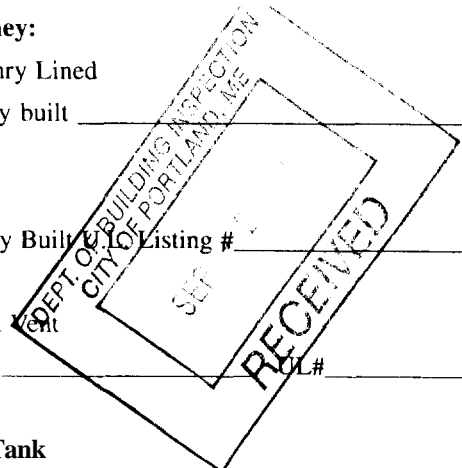
IF NO Explain: _____

The Type of License of Installer:

- Master Plumber # _____
- Solid Fuel # _____
- Oil # MS 3000 / 177
- Gas # PNT 4782
- Other _____

Type of Chimney:

- Masonry Lined
Factory built _____
- Metal
Factory Built U.L. Listing # _____
- Direct Vent
Type _____ U.L. # _____



Type of Fuel Tank

- Oil
- Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame 15 feet.

Cost of Work: \$ 28,000.-

Permit Fee: \$ 273

Approved

Fire: _____
Ele.: _____
Bldg.: _____

Approved with Conditions

See attached letter or requirement

Signature of Installer Roger Provencer

Inspector's Signature _____

Date Approved _____