

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 04-0777	Issue Date:	CBL: 063 G020001
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Location of Construction: 161 Pine St	Owner Name: Falk Gunnar B &	Owner Address: 161 Pine St	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: 2078839515
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: 24
Past Use: 4 family	Proposed Use: 4 family install 2 330 gal tanks	Permit Fee: \$48.00	Cost of Work: \$2,395.00
		CEO District: 2	
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R2 Type: HVAC BoCA 1993 Signature: JMB 6/21/04
install 2 330 gal tanks		Signature: _____ Date: _____	
Permit Taken By: gg	Date Applied For: 06/10/2004	Zoning Approval	

<p>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 <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: JMB 6/21/04</p>	<p>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 <p>Date: _____</p>	<p>Historic Preservation</p> <input checked="" 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 <p>Date: JMB</p>
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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

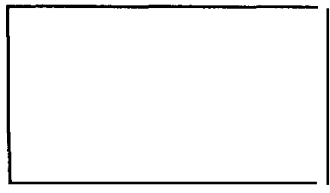
#2

63 G 020



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 161 PINE ST. Use of Building RES Date 6/10/04
 Name and address of owner of appliance PAUL VISINARE / GUNNAR FALK
161 PINE ST. PORTLAND, ME 04103
 Installer's name and address DEAD RIVER CO. 73 PLEASANT HILL RD SCARBOROUGH, ME 04070
 Telephone _____

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel:
 R Gas Oil Solid

Appliance Name: _____
 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 20006017
 R Gas # _____
 Other _____

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

Type of Fuel Tank
 Oil
 Gas

Size of Tank INSTALLATION OF 2-330 GALLON TANKS

Number of Tanks 2

Distance from Tank to Center of Flame 14' feet.

Cost of Work: \$ 2395.00

Permit Fee: \$ 48.00

Approved

Approved with Conditions

Fire: _____
 Ele.: _____
 Bldg.: _____

See attached letter or requirement

Inspector's Signature _____ Date Approved _____

Signature of Installer Paul Visinare - Dead River Co.

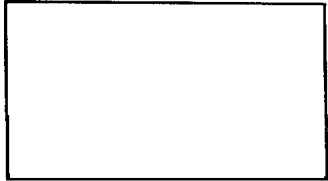
2

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 Name and address of owner of appliance PAUL VISINARE / GUNNAR FALL
161 PINE ST. PORTLAND, ME 04103
 Installer's name and address DEAD RIVER CO. 73 PLEASANT HILL RD. SCARBOROUGH, ME. 04070
 Telephone _____

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel:
 Gas Oil Solid

Appliance Name: _____
 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 20006017
 Gas# _____
 Other _____

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

Type of Fuel Tank
 Oil
 Gas

Size of Tank INSTALLATION OF 2-330 GALLON TANKS

Number of Tanks 2

Distance from Tank to Center of Flame 14' feet.

Cost of Work: \$ 2395.00

Permit Fee: \$ 48.00

Approved

Approved with Conditions

Fire: _____
 Ele.: _____
 Bldg.: _____

See attached letter or requirement

Signature of Installer

David [Signature] - Dead River Co.

Inspector's Signature

Date Approved

White - Inspection

Yellow - File

Pink - Applicant's

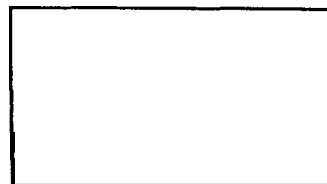
Gold - Assessor's Copy

CK. 01202383



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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 _____ Use of Building _____ Date _____

Name and address of owner of appliance _____

Installer's name and address _____

Telephone _____

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name:

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 # _____
- Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
- Gas

Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame 1 feet.

Cost of Work: \$ 200

Permit Fee: \$ 0

Approved

Approved with Conditions

Fire: _____
 Ele.: _____
 Bldg.: _____

See attached letter or requirement

Inspector's Signature _____

Date Approved _____

Signature of Installer _____

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy