City of Portland, Mai	ine - Building or Use	Permit Applicat	ion Per	rmit No:	Issue Date:	CBL:		
389 Congress Street, 043	101 Tel: (207) 874-8703	, Fax: (207) 874-8	716	10-0725		068 A	002001	
Location of Construction:	Owner Name:		Owner	r Address:		Phone:		
201 ST JOHN ST	PROSSER AL	AN	195 :	ST JOHN ST	•			
Business Name:			: Contra		tractor Address:		Phone	
	Caron & Walt	Z	321	321 Lincoln Street South Portland		d 207799	2077992228	
Lessee/Buyer's Name	Phone:		Permi HV.	t Type: AC			Zone:	
Past Use:	Proposed Use:		Permi	it Fee:	Cost of Work:	CEO District:		
3 unit residential	3 unit resident	ial - install (3)		\$410.00	\$39,000.0	0 2		
			45		Approved INS Denied Use	SPECTION: e Group: ANA SAME (2)	CType:	
Proposed Project Description:				(In				
install (3) Prestige Excelle	ence PE110		Signal		Sig	mature:		
			Action	n: 📋 Approv		d w/Conditions	Denied	
Permit Taken By:	Date Applied For:			 Zoning	Approval			
Idobson	06/22/2010			Louine				
1. This permit application	on does not preclude the	Special Zone or Re	views	Zonii	ng Appeal	Historic Pr	escrvation	
	eting applicable State and	Shoreland		Varianc	e	Not in Dist	trict or Landmar	
 Building permits do not include plumbing, septic or electrical work. 		Wetland		Miscellaneous		Does Not H	Require Review	
within six (6) months	void if work is not started of the date of issuance.	E Flood Zone		Conditio	onal Use	Requires R	eview	
False information may permit and stop all wo		Subdivision		Interpre	tation	Approved		
		🔲 Site Plan		🗌 🗌 Approve	d		w/Conditions	
PERMIT	ISSUED	all the	ndut	Denied		Denied	\mathcal{S}	
JUL - (5 2010	Date!	2416	Date:		Date:		
City of Po	ortland						L	

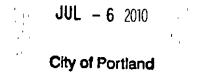
CERTIFICATION

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
		DATE	PHONE

City of Portland, Mai	ne - Building or Use Permit		Permit No:	Date Applied For:	CBL:
•	01 Tel: (207) 874-8703, Fax: (20	7) 874-8716	10-0725	06/22/2010	068 A002001
Location of Construction:	Owner Name:		Owner Address:		Phone:
201 ST JOHN ST	PROSSER ALAN		195 ST JOHN ST		
Business Name:	Contractor Name:		Contractor Address:		Phone
	Caron & Waltz		321 Lincoln Street	South Portland	(207) 799-2228
Lessee/Buyer's Name	Phone:		Permit Type:		
			HVAC		
Proposed Use:		Propose	Project Description:		
3 unit residential - install (3	B) Prestige Excellence PE110	install	(3) Prestige Excelle	ence PE110	
1					
Dept: Zoning	Status: Approved with Conditions	Reviewer	: Marge Schmucka	1 Approval Da	ate: 06/22/2010
Note:			5		Ok to Issue: 🔽
1) Separate permits shall h	be required for future decks, sheds, po	ools and/or c	rarages		
	•				
	al for an additional dwelling unit. Yo h as stoves, microwaves, refrigerator				nt including, but
 This property shall rem approval. 	ain a three family dwelling. Any cha	nge of use sh	all require a separate	e permit application	for review and
Dept: Building	Status: Approved with Conditions	Reviewer	: Tammy Munson	Approval Da	ate: 07/06/2010
Note:					Ok to Issue: 🗸
1) The installation must co	omply with the State of Maine Gas R	egulations.			
.,		-0			
Dept: Fire	Status: Approved with Conditions	Reviewer	: Capt Keith Gautre	eau Approval Da	ate: 06/25/2010
Note:					Ok to Issue: 🖌
1) No means of egress sha	Il be affected by this renovation				
, C	•				
 Install shall comply wit A compliance letter is r 					

PERMIT ISSUED



Fill IN AN	ID SIGN WITH INK
	N FOR PERMIT OWER EQUIPMENT
accordance with the Laws of Maine, the Building Code of	48-A-2 Use of Building RESIDENTIAL Date 6/10/10
	21 LINCOLN ST SOLONTUMO, ME 04106 Telephone 799-7228
Location of appliance: Basement I Floor Attic I Roof	Type of Chimney: Masonry Lined Factory built
Type of Fuel: Jar Gas Oil Solid Appliance Name: Patstiget Exclusive Pt10 U.L. Approved Jar Yes No	Metal Factory Built U.L. Listing # Direct Vent TypeUL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No IF NO Explain:	Type of Fuel Tank Gas (NATUME)
The Type of License of Installer:	Size of Tank <u>NA</u>
Master Plumber # Solid Fuel # Oil # Gas # P NT 1619 Other Other	Distance from Tank to Center of Flame <u>NA</u> feet. Cost of Work: <u>\$39,000</u> Permit Fee: <u>\$400</u>
Approved JUN 2 10 2 10 2 10 2 10 2 10 2 10 2 10 <th10< th=""> 10 <th10< th=""> <th10< td="" th<=""><td>Approved with Conditions See attached letter or requirement</td></th10<></th10<></th10<>	Approved with Conditions See attached letter or requirement
Bldg.: Green Signature of Installer White - Inspection Yellow - File	Inspector's Signature Date Approved Pink - Applicant's Gold - Assessor's Copy

	iginal Receipt
	iyillal necelpi
	6:22 2010
ceived from	turn wiltz
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	51-203 State
ost of Construction \$	Building Fee:
······································	Site Fee:
	Certificate of Occupancy Fee:
<u></u>	Total:
ilding (IL) Plumbing (IS	i) Electrical (I2) Site Plan (U2)
1: 68·1-2	· · · · · · · · · · · · · · · · · · ·
	Total Collected s//0
ICK #:	
No work is to h	a started until normit issued
	e started until permit issued. ginal receipt for your records.
	, -