			PERMIT	ISSUED		
•	Iaine - Building or Use 94101 Tel: (207) 874-870		on Permit No: Issue Date:	CBL:		
Location of Construction:	Owner Name:		Owner Address	P one:		
209 Dartmouth St Lynn Eric R & Contractor Name:		ኔ	209 Dartmout CATY OF P	ORTLAND		
		e:	Contractor Address:	Phone		
n/a	Sheldons Plui	nbing & Heating	31 Peary Terrace South Portla	nd 2077996211		
Lessee/Buyer's Name	Phone:		Permit Type:	Zone:		
n/a	n/a		HVAC			
Past Use:	Proposed Use:		Permit Fee: Cost of Work	: CEO District:		
Multi Family / 3 units	Multi Family tank	/ Install 275 gallon oil	\$30.00 \$0.00 3 FIRE DEPT: Approved INSPECTION: 15 Type: 5			
			Denied	Use Group: R-3 Type: SE BOLA 1999 Signature: T. MMS		
			_	BOLA 1999		
Install Heating System			Signature: $\chi^2 M^2$ PEDESTRIAN ACTIVITIES DIST	Signature: T. MMS		
			Action: Approved Approved Approved	Med w/Conditions Denied		
		1	Signature:	Date:		
Permit Taken By:	Date Applied For: 10/22/200 1		Zoning Approva	l		
1. This permit applica	tion does not preclude the	Special Zone or Rev	views Zoning Appeal	Historic Preservation		
	meeting applicable State and	Shoreland	☐ Variance	Not in District or Landman		
2. Building permits do not include plumbing, septic or electrical work.		☐ Wetland	Miscellaneous	Does Not Require Review		
	re void if work is not started hs of the date of issuance.	Flood Zone	Conditional Us	Reduires View		
False information n permit and stop all	nay invalidate a building work	Subdivision	☐ Interpretation	Approved		
		Site Plan	Approved	Approved w/Conditions		
		Maj Minor Minor Minor	M Denied	Denied		
		Date: ///02/0	Date: 11/02/01	Date: 11/02/01		
I have been authorized by jurisdiction. In addition,	y the owner to make this appl if a permit for work describe	ication as his authorized in the application is	ION the proposed work is authorized bed agent and I agree to conform to issued, I certify that the code officenable hour to enforce the provis	o all applicable laws of this cial's authorized representative		
SIGNATURE OF APPLICAN	T	ADDRE	SS DATE	PHONE		
RESPONSIBLE PERSON IN	CHARGE OF WORK, TITLE		DATE	PHONE		

4/22/03- installed OK Jon M.

Cont permet 01-1320

(BL# 082-A-18

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

	F	PERMIT ISSUE	
IT		NOV 2 2001	
IENT	Cl	V OF PORTLAI	ND
08	2	A019	

To the INSPECTOR OF BUILDIN OPORTL\ 300

			,						
The	undersigned he	reby applies fo	r apermit to	o install thefo	llowing hed	ating, cook	ing or power	equipment in	ļ
accordance	with the Laws of	of Maine, the B	Ruilding Cod	le c f the City c	f Portland,	and thefol	llowing speci	fications:	

Location 209 DANTH MOUTH 5+, Use Name and address of owner of appliance	•
Installer's name and address SHELDONLI DLVMBIN 31 PEARY TEALALE SOLPOLT LAND	106 + HEATING 1118 Telephone 799-62//
Location of appliance: Basement	Type of Chimney: Masonry Lined Factory built Metal
Gas Oil Solid Appliance Name: 56/ERIOR U.L. Approved Yes No	Factory Built U.L. Listing # Direct Vent Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No IF NO Explain:	Type of Fuel Tank Oil Gas Size of Tank
The Type of License of Installer: Master Plumber # M S 2 3 6 2 Solid Fuel # Gas# Other Other	Number of Tanks feet.
Approved Fire:	Approved with Conditions See attached letter or requirement

partment: Building	Status: Approved	Reviewer	Tammy Munsor
nments:		Approval Date	[11/02/2001
		Given On Date	[11/02/2001
✓ OK to Issue Permit	Name Tammy Munson	Date : 11/02/2001	Date 2
Conditions Section:	Add New Condition From	Add New Condition	Delete Condition
Must comply with State Oil Burn			
잃었다는 이 살아보고 하면 있다. 씨는 그리는 모양하다			

(GENERAL RECEIPT)

CITY OF PORTLAND, MAINE

DEPARTMENT	DATE (
REGELVED FROM	1351	09/0/	
		_	
ADDRESS CULLUL CLUB 3			
204 cillon ave	39 (7036	
and Doubenoutle	RÉVENDE	DOLEAR/)	8
3 Hardenyo		9000)
;		,	
Clark HI	()		
☐ CASH ☐ CHECK ☐ OTHER	TOTAL	C100	
RECEIVED BY GBE INFORMATION SYSTEMS BOX \$78, Portland, ME 04104 (20		200747-BP	