City of Portland, Maine	8		ion	rmit No: Issue Date	:	CBL:
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871				01-0196		084 K004001
Location of Construction:	Owner Name:	Owner Name:		Owner Address:		Phone
54 Welch St	Randall Earl N	Randall Earl Macneill Post		Welch St		
Business Name:	Contractor Name	Contractor Name:		Contractor Address:		Phone
n/a	Paul Erico		58 E	58 Elizabeth Street Peaks Island		2077662482
Lessee/Buyer's Name	Phone:		Permi	ermit Type:		Zone:
n/a	n/a		HV.	AC		
Past Use: American Legion	Proposed Use: American Legi	on		Appioved		TION: bup: Type:
Proposed Project Description: Replace Furnace	PEDESTRIAN ACTIVITIES DISTRIC		proved w/C			
Permit Taken By:	Date Applied For: 03/09/2001	Zoning Appro			al	
gg		Special Zone or Re	eviews	Zoning Appeal		Historic Preservation
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> </ol>		Shoreland		Variance	1	Not in District or Landma
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>		Wetland		Miscellaneous		Does Not Require Review
<ol> <li>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</li> </ol>		Flood Zone		Conditional Use		Requires Review
		Subdivision		Interpretation		Approved
		Site Plan		Approved		Approved w/Conditions
		Maj 🔝 Minor 🔝 N	ИМ	Denied	3	Denied
		Date:		Date:	Da	ate:

## CERTIFICATION

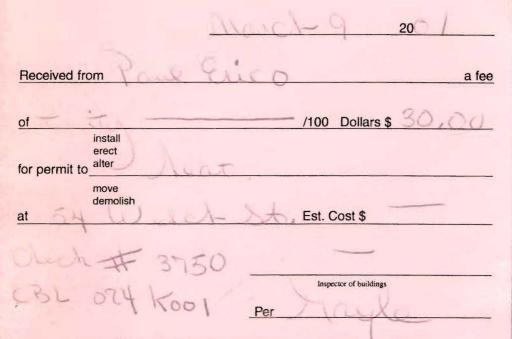
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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



## CITY OF PORTLAND, MAINE

**Department of Building Inspection** 



## THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$5.00 or 10% whichever is greater.

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Auditors Copy

FILL IN AND S	SIGN WITH INK FOOSY CLEAR HE CONTACT						
APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT REPLACE FURNACE							
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 <u>54 WELLHST</u> , <u>PEAKS</u> , Use Name and address of owner of appliance <u>AMERICAN LEG</u> <u>POST 142</u> WELCH ST PEAKS I Installer's name and address <u>PAML ERICO</u> 58 EL							
Location of appliance: Basement I Floor Attic I Roof	Type of Chimney: Masonry Lined Factory built						
Type of Fuel:       Gas       Oil       Solid         Appliance Name:       MANT       Solid         U.L. Approved       Yes       No	<ul> <li>Metal</li> <li>Factory Built U.L. Listing #</li> <li>Direct Vent</li> <li>Type UL#</li> </ul>						
Will appliance be installed in accordance with the manufacture's installation instructions?  Yes  No	Type of Fuel Tank Oil Gas Size of Tank 27 5						
The Type of License of Installer:   Master Plumber #   Solid Fuel #   Oil #   Oil #   Gas #   Other	Number of Tanks Distance from Tank to Center of Flame feet.						
Approved         Fire:	Approved with Conditions  See attached letter or requirement  Kink - Applicant's Gold - Assessor's Copy						

23 al. 1		
hite -	Inspect	ion
mile -	mapeet	IOI

Yellow - File

3/20 Work Completed DO

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