

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1535	Issue Date:	CBL: 086 A011001
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Location of Construction: 410 Seashore Ave	Owner Name: Sturrock Sandra G	Owner Address: 55 West Fairbranch	Phone:
Business Name: n/a	Contractor Name: Salevsky & Sons Plumbing & Heatin	Contractor Address: PO Box 242 Cape Cottage Road Cape	Phone 2078838069
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone:

Past Use: Single Family	Proposed Use: Single family / Install 275 gallon Oil Tank	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 3
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FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: 13 Type: SB <i>Per a 9.5 mech State of Maine Oil & Solid Fuel Dist</i>
Signature:	Signature:

Proposed Project Description: Install Heating System

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
	<input type="checkbox"/> Denied	
Signature:	Date:	

Permit Taken By: gg	Date Applied For: 12/14/2001	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	Special Zone or Reviews <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"/>	Zoning Appeal <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	Historic Preservation <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:	Date:	Date:

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



FILL IN AND SIGN WITH INK *TUDC*

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



086 A 011

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 *410 Sea Shore Pecks Island* Use of Building *Single Fam.* Date *12/14/01*
Name and address of owner of appliance *Sturrock*

Installer's name and address *Salevsky & Son's Plg & Htg. Inc.*
P.O. Box 242 Cape Cottage Bt. Cape Elizabeth 04107 Telephone *883-8069*

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: *H. B. Smith*

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 # *2710*
- Oil # *2710*
- Gas # _____
- Other _____

Type of Chimney:

- Masonry Lined
- Factory built _____

- Metal
- Factory Built U.L. Listing # _____

- Direct Vent
- Type _____ UL# _____

Power Vent *Tijuana Island*

Type of Fuel Tank

- Oil
- Gas

Size of Tank *275 gal.*

Number of Tanks *1*

Distance from Tank to Center of Flame *10' +* feet.

\$30.00

Approved

Fire: _____
Ele.: _____
Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer *[Signature]*

White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy