DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK **CITY OF PORTLAND** Please Read **INCRECTION Application And** Notes, If Any, Permit Number PERMIT ISSUED **D** = HM. Attached This is to certify that ADKINS KYRA DEC 1 5 2006 has permission to Install wood stove w/bestos mney AT 21 LUTHER ST 087 E02800 epting this permit shall comply with all provided that the person or persons rm or lìon a of the provisions of the Statutes of ine and or the P ances of the City of Portland regulating the construction, maintenance and e of buildings and ctures, and of the application on file in this department. f inspe on mus ficatio Apply to Public Works for street line en perm on proc A certificate of occupancy must be n and w and grade if nature of work requires Iding or rt there re this procured by owner before this buildsuch information. ed or ing or part thereof is occupied. bsed-in UR NO **EQUIRED OTHER REQUIRED APPROVALS** 12/14/06 Fire Dept. Health Dept. **Appeal Board** Other _ Director - Building & Inspection Services Department Name PENALTY FOR REMOVING THIS CARD

Form # P 04

City of Portland, Main	e - Building or Use	Permit Applicatio	n Pe	rmit No:	Issue Date:	CBL:	
389 Congress Street, 0410			06-1768		087 E028001		
Location of Construction: Owner Name:			Owner Address:		Phone:		
21 LUTHER ST	ADKINS KY	RA	21 LUTHER ST				
Business Name: / Contractor Name		Contractor Address:			Phone		
essee/Buyer's Name Phone:			Permit Type: HVAC			Zone: TR-Z	
Past Use: Proposed Use:			Perm	uit Fee:	Cost of Work:	CEO District: 4347	
stove w/bestos		y Home - Install wood		\$30.00	\$1,000.00	2	
			FIRE	DEPT:	_ Ilse	ECTION: Group: U Type: Store	
Proposed Project Description:	Chimmen		0	$\rho \gamma$	C	alit	
Install wood stove w/bestos	Chimney	Signature:			Signa VITIES DISTRICT		
			Actio	n: Approv	ved Approved	w/Conditions Denied	
	Date Applied For:		Signa	iture:		Date:	
Permit Taken By: Idobson			Zoning	Approval			
		Special Zone or Reviews		Zonii	ng Appeal	Historic Preservation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland				Not in District or Landmark	
2. Building permits do not include plumbing, septic or electrical work.		U Wetland		Miscellaneous		Does Not Require Review	
3. Building permits are voi within six (6) months of	Flood Zone		Condition Condition	onal Use	Requires Review		
False information may invalidate a building permit and stop all work.		Subdivision			tation	Approved	
		Site Plan			ed	Approved w/Conditions	
PERM	MIT ISSUED	Maj Minor MA	∮ □ >	Denied		Denied	
DEC	2 1 5 2005	Date: 12 13 0	je-	Date:		Date:	
	F PORTLAND						

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 A	ADDRESS	DATE	PHONE



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 21	lut	hosst		
Total Square Footage of Proposed Structure		Square Footage of Lot		
		1 0		
Tax Assessor's Chart, Block & Lot	Owner:			Telephone:
Chart# Block# Lot#	X X	yra Adhi!	C	01-11-12
+87 E 28	1 7	già Hanu!	シ	7720020
Lessee/Buyer's Name (If Applicable)	Applicant nar	ne, address & telephone:	Co	st Of
	Kura A	dhins	W	ork: \$
		ther St	Fe	e: \$ 30 PD
	Peak	s Isleme 0410	ψ _C	of O Fee: \$
Current Specific use:				
If vacant, what was the previous use?	0	0 01		
Proposed Specific use:				
Project description:	١	Í		r
install	ing v	Jood Stu) ('	S 55 Chimney
	($\int \int \partial $	1	
	t h	1 metal be	ST	5 Chimney
Contractor's name, address & telephone:			<u> </u>	
	V	A(c) ac		/
Who should we contact when the permit is read	ly: hyr	a Halfuly		
Mailing address:	Phone:	1770020		

Please submit all of the information outlined in the Commercial Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at <u>www.portlandmaine.gov</u>, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Date: Signature of applicant:

This is not a permit; you may not commence ANY work until the permit is issued.

City of Portland, Maine - Building or Use Permit				Permit No:	Date Applied For:	CBL:		
389 Congress Street	04101 Tel: (207) 874-8703, Fax: (20	07) 874-8716	06-1768	12/11/2006	087 E028001		
Location of Construction:	cation of Construction: Owner Name:			Owner Address:	Phone:			
21 LUTHER ST		ADKINS KYRA		21 LUTHER ST				
Business Name:		Contractor Name:		Contractor Address:	Phone			
Lessee/Buyer's Name	<u>_</u>	Phone:		Permit Type: HVAC				
Proposed Use:		<u></u>	Proposed	Project Description				
Single Family Home - Install wood stove w/bestos Chimney			Install	Install wood stove w/bestos Chimney				
Dept: Zoning Note:	Status: A	pproved	Reviewer:	Marge Schmucka		ate: 12/13/2006 Ok to Issue: ☑		
Dept: Building	Status: A	pproved with Conditions	Reviewer:	Tammy Munson				
Note:						Ok to Issue: 🗹		
, ,	•	ppliance, the product informing, NFPA 211, IMC 2003			•	d. The heating		
2) A copy of the encl Certificate of Occ	•	lisclosure must be submitte	ed to this office	upon completion	of the permitted worl	c or for the		
3) The heating applia	nce/stove shall	be installed, maintained a	nd operated in	accordance with th	ne terms of the listing			

