

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 04-1214	Issue Date:	CBL: 087 W007001
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Location of Construction: 224 Island Ave	Owner Name: Moss Stewart M	Owner Address: 224 Island Ave	Phone:
Business Name:	Contractor Name: Fredrick Brothers Oil	Contractor Address: 164 Route One Scarborough	Phone: 2078832551
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: IR-2

Past Use: Single Family Home	Proposed Use: Single Family Home Install Monitor /Toyostove	Permit Fee: \$30.00	Cost of Work: \$316.00	CEO District: 2
Proposed Project Description: Install Monitor /Toyostove		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>J</i> Type: <i>Heating</i> <i>BOLA Mechanical 1993</i>	
		Signature:	Signature:	
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: Idobson	Date Applied For: 08/18/2004	Zoning Approval		
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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"/> Date: <i>8/19/04</i>	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 Date: _____	Historic Preservation <input checked="" 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: <i>8/19/04</i>
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CERTIFICATION

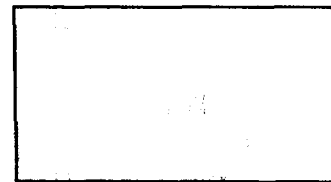
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition,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

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



87 W 7

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 / CBL 224 Island Ave Use of Building Single Family Date 8/16/04
 Name and address of owner of appliance Stewart M. Moss
POT - owner 224 Island Ave, Peaks Island,
 Installer's name and address Frederick Bro. Oil
164 Route one Scar. ME Telephone 883-2551

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Monitor Hotwater

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 # _____
- Oil # MS10008189
- Gas # _____
- Other _____

Type of Chimney:

- Masonry Lined
Factory built _____
- Metal
Factory Built U.L. Listing # _____
- Direct Vent
Type _____ UL# _____

Type of Fuel Tank

- Oil 18
- Gas

Size of Tank 275 Gal

Number of Tanks one

Distance from Tank to Center of Flame 30' feet.

Cost of Work: \$ 316.00

Permit Fee: \$ 30.00

Approved

Fire: _____
 Ele.: _____
 Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer Matthew Stewart M. Moss

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Location of Construction: 224 Island Ave	Owner Name: Moss Stewart M	Owner Address: 224 Island Ave	Phone:
Business Name:	Contractor Name: Fredrick Brothers Oil	Contractor Address: 164 Route One Scarborough	Phone (207) 883-2551
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Single Family Home Install Monitor /Toyostove	Proposed Project Description: Install Monitor /Toyostove
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Dept: Zoning	Status: Approved	Reviewer: Tammy Munson	Approval Date: 08/19/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		

Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 08/19/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Installation shall comply with 1993 BOCA Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules			



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Name and address of owner of appliance Stewart M. MOSS 224 Island Ave

Installer's name and address FREDERICK BROS OIL
164 ROUTE ONE SCAR. ME. Telephone 983-2551

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: MONITOR TOYOSTOVE

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 # _____
- Oil # MS10008588
- Gas # _____
- Other _____

Type of Chimney:

- Masonry Lined
Factory built _____
- Metal
Factory Built U.L. Listing # _____
- Direct Vent
Type _____ UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank 275 GAL

Number of Tanks ONE

Distance from Tank to Center of Flame 30' feet.

Approved

Fire: _____
Elec.: _____
Bldg.: _____

Approved with Conditions

See attached letter or requirement

Signature of Installer [Signature]

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

87 W 7