

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-0601	Issue Date: JUN 5 2001	CBL: 092 E023001
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Location of Construction: 635 Island Ave	Owner Name: Sanford Edward And Mary Ann	Owner Address: 635 Island Ave Peaks Island, Me 04110	Phone: 207-766-2508
Business Name: n/a	Contractor Name: Lionel Plant Associates	Contractor Address: 98 Island Avenue Peaks Island	Phone: 2077662508
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: single family	Proposed Use: single family, adding boiler	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: HVAC Use Group Type BOCA/MC/1993	

Proposed Project Description:
Boiler & tank

EXPIRED

Signature: _____

Signature: _____

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature _____ Date: _____

Permit Taken By: jodinea	Date Applied For: 05/31/2001	Zoning Approval
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<ol style="list-style-type: none"> 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: _____	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 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: _____
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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

01-0601

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMIT ISSUED
JUN - 5 2001
CITY OF PORTLAND

092-E-023

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 PEAK ISLAND ME Use of Building HOME Date 5-25-01
Name and address of owner of appliance ROD + CINDY MITCHELL
635 ISLAND AVE PEAKS ISLAND ME
Installer's name and address LIONEL PLANTE ASSO. 98 ISLAND AVE PEAKS ISLAND
Telephone 766-2500/1003

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel:
 Gas Oil Solid

Appliance Name: BUDERUS BOILER
 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 # MS30002635 ✓
 Oil # _____
 Gas # _____
 Other _____

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

Type of Fuel Tank
 Oil Gas

Size of Tank 330 GALLONS

Number of Tanks 1

Distance from Tank to Center of Flame 10 feet.

Approved
 Fire: _____
 Ele.: _____
 Bldg.: _____

Signature of Installer Terrence J. Muller

Approved with Conditions
 See attached letter or requirement

\$30.00
5/25



CITY OF PORTLAND, MAINE

Department of Building Inspection

5/25 20 01

Received from Colonel Plante, Assu a fee

of Ninety dollars /100 Dollars \$ 90.00

for permit to install
erect
alter 3 HVAC Permits

at 318 Seashore Ave ESCC7 Est. Cost \$ —
448 Island Ave 90-G-5
655 Island Ave 92-E-23

CK # 14681

Inspector of buildings
Per [Signature]

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

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 9/16/03
 Permit # 2003 4874
 CBL# 92 E 023

LOCATION: 635 Island ave Peaks METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER MARY ANN SANFORD
 TENANT _____ PHONE # _____

exchange 20 space panel for 40 space, add dryer outlet, move outlet

					TOTAL	EACH FEE
OUTLETS	Receptacles	Switches	Smoke Detector			.20
FIXTURES	Incandescent	Fluorescent	Strips			.20
SERVICES	Overhead	Underground	TTL AMPS	<800		15.00
	Overhead	Underground		>800		25.00
Temporary Service	Overhead	Underground	TTL AMPS			25.00
						25.00
METERS	(number of)					1.00
MOTORS	(number of)					2.00
RESID/COM	Electric units					1.00
HEATING	oil/gas units	Interior	Exterior			5.00
APPLIANCES	Ranges	Cook Tops	Wall Ovens			2.00
	Insta-Hot	Water heaters	Fans			2.00
	Dryers	Disposals	Dishwasher			2.00
	Compactors	Spa	Washing Machine			2.00
	Others (denote)					2.00
	MISC. (number of)	Air Cond/win				3.00
		Air Cond/cent		Pools		10.00
	HVAC	EMS	Thermostat		5.00	
	Signs				10.00	
	Alarms/res				5.00	
	Alarms/com				15.00	
	Heavy Duty(CRKT)				2.00	
	Circus/Carnv				25.00	
	Alterations				5.00	
	Fire Repairs				15.00	
	E Lights				1.00	
	E Generators				20.00	
PANELS	Service	Remote	Main			4.00
	TRANSFORMER	0-25 Kva				5.00
	25-200 Kva				8.00	
	Over 200 Kva				10.00	
				TOTAL AMOUNT DUE		
				MINIMUM FEE/COMMERCIAL	45.00	
				MINIMUM FEE	35.00	



35.00

CONTRACTORS NAME McIntyre Electric MASTER LIC. # _____
 ADDRESS 8 Spoonbush Ct. E. LIMITED LIC. # LM50016936
 TELEPHONE 799-5155

SIGNATURE OF CONTRACTOR [Signature]