

City of Portland, Maine - Building or Use Permit Application

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

PERMIT ISSUED		CBL:
Permit No: 02-1106	Issue Date: 2/2002	092 F015001

Location of Construction: 32 Evergreen Ledge	Owner Name: Filipos Barbara A &	Owner Address: 315 Spring St	Phone:
Business Name: n/a	Contractor Name: Chadwick Tarling	Contractor Address: Coach Road So. Portland	Phone: 2077742404
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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Proposed Project Description: Install heating system	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: R-3 Type: NA Signature: [Signature] Date: 9/30/02
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Permit Taken By: gg	Date Applied For: 09/25/2002	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"/> 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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EXPIRED

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 Inspections

2006.05 2007

Received from David E Mack Williams

Location of Work Pink Island 32 Evergreen

Cost of Construction \$ _____ State Fee 100.00

Permit Fee \$ 130.00 Head Fee 3000

Building (IL) Plumbing (IS) Electrical (I2) Site Plan (U2)

Other head

CBL: 092 F 015

Check #: 1003 Total Collected \$ 130.00

THIS IS NOT A PERMIT

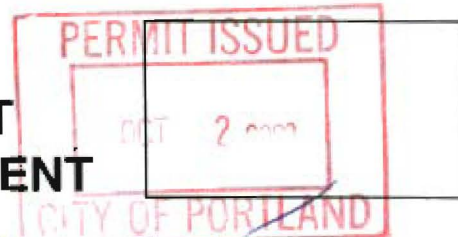
No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



092 F015

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 Peach Island Use of Building _____ Date 9-25-02
 Name and address of owner of appliance Constantine Filipous
119 S. Hill St. 32 Evergreen
 Installer's name and address Chad Farley
40 Coach Rd. So. Port. Telephone 7251748

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Burnham

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 # 933
- Gas # _____
- Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
- Gas

Size of Tank 275 \$ 150.00

Number of Tanks 1

Distance from Tank to Center of Flame 10 feet.

Cost of Work: \$ 6000.00

Permit Fee: \$ _____

Approved

Approved with Conditions

- See attached letter or requirement

Fire: _____
 Ele.: _____
 Bldg.: [Signature]

Inspector's Signature _____ Date Approved _____

Signature of Installer Chad Farley #933