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Cu an a late	D 111 T	n ,	4 4 10 40	Per	mit No:	Assue Date		BL:		
City of Portland, Maine	_			1	04-1697	- K	00 E	R-	003001	
389 Congress Street, 04101		, Fax:	(207) 874-871			1		121 EC	003001	
Location of Construction:	Owner Name:	T2 0 7T		ı	Address:			Phone:		
9 Highland St Nicoll Donald E &			lda F Jts				·.,	and and		
Business Name:	Contractor Name			Contractor Address:				Phone		
	Dead River Co			PO Box 467 Scarborough Permit Type:				2078839515		
Lessee/Buyer's Name	Phone:			HVA					Zone: K3	
	<u> </u>			<u> </u>		1		1	<u> </u>	
Past Use:	Proposed Use:			Permi		Cost of Wor		CEO District:	1	
single family home	1 * '	gle family home w/new oil			\$10200	\$8,6	5000	3		
	furnace					Approved	INSPE	CTION:	Thomas	
						Denied	Use Gr	roup	L AC	
							1	7	ייטאן	
Proposed Project Description:				-				TRC 200	10	
install new oil furnace in singl	la family hama						Ciamatu	Use Group Type: HVAC TRC 2003 Signature AMB 12 1 1 04		
instan new on furnace in singi	ie rainity nome			Signat	ure		Signan	Signature WWW 101104		
				,						
				Action	: Appro	ved App	proved w	/Conditions	Denied	
				Signat	ure:			Date:		
Permit Taken By:	Date Applied For:					g Approva	.1			
jharris	11/15/2004				Zomne	Approva	11			
	as not proclude the	Spe	cial Zone or Revie	ws	Zoni	ng Appeal		Historic Pre	servation	
1. This permit application do Applicant(s) from meeting		Shoreland		☐ Variance				Not in District or Landmark		
Federal Rules.	5 applicable State and							Trot in District of Earland		
		\square w	etland	Miscellaneous			Does Not Require Review			
2. Building permits do not include plumbing, septic or electrical work.		'''	ctiana	Miscentineous		ancous	Boos Not Require Review			
-			Flood Zone Conditiona		onal Use	l Use Requires Review		view		
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			Subdivision		Interpretation			Approved		
permit and stop all work		<u> </u>		·						
			Site Plan		Approved			Approved w/Conditions		
			69							
		Maj∫	Minor MM		Denied			Denied	1	
		1	Q 1) [0-00	V/2-	
		Date:	MD 15/1	04	Date:);	ate:XXVV.		
		'	11							
			Ĵ					U		
		C	ERTIFICATI	ON						
I hereby certify that I am the ov	vner of record of the na	med pro	perty, or that th	e prop	osed work is	s authorized	by the	owner of reco	rd and that	
I have been authorized by the o										
jurisdiction. In addition, if a pe										
shall have the authority to enter such permit.	an areas covered by su	icn perm	nt at any reason	able ho	our to enforc	the provi	sion of	tne code(s) ap	piicable to	
such permit.										
SIGNATURE OF APPLICANT			ADDRESS			DATE		PHC	NE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK. TITLE

City of Portland, Maine - Building or Use Permit				Permit No:	Date Applied For:	CBL:		
389 Congress Street,	04101 Tel: (207) 874-8703, Fax:	04-1697	11/15/2004	121 E003001			
Location of Construction: Owner Name:			0	wner Address:	Phone:			
9 Highland St		Nicoll Donald E & Hilda F Jts		Highland St				
Business Name: Contractor Name:		C	ontractor Address:	Phone				
Dead River Company			F	O Box 467 Scarb	(207) 883-9515			
Lessee/Buyer's Name Phone:		Phone:	Permit Type:			•		
] :	HVAC				
Proposed Use:			Proposed	Project Description:				
			install n	ll new oil furnace in single family home				
Dept: Zoning	Status: A	pproved	Reviewer:	Jeanine Bourke	Approval Da	te: 12/01/2004		
Note:						Okto Issue: 🔽		
Dept: Building	Status: A	pproved	Reviewer:	Jeanine Bourke	Approval Da	te: 12/01/2004		
Note:						Ok to Issue: 🗹		
1) Installation shall co	mply with 200	3 International Mechan	ical Code and Stat	e of Maine Oil an	d Solid Fuel Board L	aws and Rules		
-	1 3		-	-	_			



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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	- 1
	1

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The	e undersigned h	ereby appliesf	or a permit to	install the	following h	eating, cook	ing or power	equipment in
accordanc	e with the Laws	of Maine, the	Building Cod	e of the City	y of Portland	d, and the fo	llowing speci	fications:

Location / CBL 21 E3	Use of Building Residue Date
Name and address of owner of appliance Dovuld & Hildu 9 Hishland 5	+ Portand WE
Installer's name and address Dead RIVER CO. 73 Pleasurt Hill Id	Supplied 883-9515
Location of appliance:	Type of Chimney:
Basement	Masonry Lined Factory built
Type of Fuel:	☐ Metal
☐ Gas ☐ Oil ☐ Solid	Factory Built U.L. Listing #
Appliance Name: Level FCT - Old Boiler U.L. Approved Yes O No	☐ Direct Vent Type ul.#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No	Type of Fuel Tank
IF <u>NO</u> Explain:	□ Gas 7007 № 1 ΛΟΝ Size of Tank 330
The Type of License of Installer:	Number of Tanks
□ Master Plumber # □ Solid Fuel # □ Oil # 115 300087/0 □ Gas #	Distance from Tank to Center of Flame feet. Cost of Work: \$\frac{1}{2} \left(\frac{1}{2} \right) \frac{1}{2} \left(\frac{1}{2} \right) \frac{1}{2} \right(\frac{1}{2} \right) \frac{1}{2} \right) \frac{1}{2} \right(\frac{1}{2} \right) \frac{1}{2} \right) \frac{1}{2} \right(\frac{1}{2} \right) \frac{1}{2} \right) \frac{1}{2} \right\}
☐ Other	Permit Fee: $\$ LOQ.^{OO}$
<u>Approved</u>	Approved with Conditions
Fire:	☐ See attached letter or requirement
Ele.: Bldg.: Signature of Installer	Inspector's Signature Date Approved
	ink Applicant's Gold Assessor's Copy