Cit	y of Portland, Maine	e - Buil	ding or Use	Permi	t Application	n Pe	rmit No:	Issue Date	:	CBL:	
	Congress Street, 04101		_				08-0028		_	122 E0	02001
Location of Construction:			Owner Name:			Owner Address:				Phone:	
313 STEVENS AVE WI			WILSON JEN	WILSON JENNIFER M & CALEB			313 STEVENS AVE				
Business Name:			Contractor Name:			Contractor Address:				Phone	
			Residential Services/ Martin Barry			1155 Sawyer Road Cape Elizabet			abeth	th 2077999256	
Lessee/Buyer's Name			Phone:			Permit Type:				Zone:	
						HVAC					R5
Past Use: Propos			Proposed Use:	roposed Use:			Permit Fee: Cost of Work:			CEO District:	i –
2 unit residential			· -	ial - install a Baxi		\$70.00		\$5.00	00.00	3	
			3.01direct vent Boiler -natural gas			FIRE DEPT:		<u> </u>	INSPE	CTION:	
						Approved Us			Use Gr	oup: R 3	Type:
								Denied		Use Group: R3 Type: HWAT  ME Gas Ruccs  Signature: MB 1/1/08	
								ME	Gas Ru	les	
Proposed Project Description:						-¦ '				2	1 1
1	tall a Baxi 3.01 direct vent	Boiler -n	natural gas			Signature: Sig			Signatu	re: MB 1	12/08
			3			PEDESTRIAN ACTIVITIES DISTRIC			RICT (I	CT (P.A.D.)	
						Actio	on: Appro	vea Ap	orovea w	Conditions	Denied
						Signature:				Date:	
Pern	nit Taken By:	Date Ap	plied For:			Zoning Approval					
ldo	obson	01/09	/2008				Zomne	, rippio.	••		
1	This permit application d	loes not r	preclude the	Spe	cial Zone or Revie	ws	ws Zoning Appeal			Historic Preservation	
1. This permit application does not p Applicant(s) from meeting applica					Chamland		Variance			Not in District or Landman	
	Federal Rules.	-6 appne	able State and Shoreland		loreiand	Variance				Not in District of Editorial	
			J	_ w	etland	Miscellaneous				Does Not Require Review	
2. Building permits do not include plumbing,			Wettand		Wisconancous						
septic or electrical work.			Flood Zone		Conditional Use			Requires Review			
3. Building permits are void if work is not started within six (6) months of the date of issuance.				Thou zone Conditional Osc			resquires res				
False information may invalidate a building				Subdivision			Interpretation			Approved	
permit and stop all work				7 Fam	al 14						
PERMITISSUED  JAN C 2000				te Plan Oa	Approved			Approved w/Conditions			
				MARSE	1500						
			UFD T	Subdivision  Site Plan  Maj Minor MM		Denied			Denied		
						Ш			- 1		
			.	Date: AM / 1/9/03		8 Date:			Date:		
JAN S 2008   L			Bate.   Date.			Date.					
			- 1 1	IJ.							
	L CHY OF F	11000	AND								
	The state of the s	L	MAD								
				C	ERTIFICATI	ON					
I hei	reby certify that I am the o	wner of i	record of the na				nosed work is	s authorized	hy the	owner of reco	d and that
	ve been authorized by the										
	sdiction. In addition, if a p										
	I have the authority to ente	er all area	as covered by su	ich pern	nit at any reasoi	nable l	nour to enforce	ce the provi	sion of	the code(s) ap	plicable to
such	permit.										
SIGNATURE OF APPLICANT				ADDRESS			S DATE			PHONE	
								<b>.</b>		1110	
											_
RES	PONSIBLE PERSON IN CHAR	GE OF WO	ORK, TITLE					DATE		PHO	NE

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 08-0028 01/09/2008 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 122 E002001 Location of Construction: Owner Name: Owner Address: Phone: WILSON JENNIFER M & CALEB 313 STEVENS AVE 313 STEVENS AVE Contractor Address: Business Name: Contractor Name: Phone Residential Services/ Martin Barry 1155 Sawyer Road Cape Elizabeth (207) 799-9256 Lessee/Buyer's Name Permit Type: Phone: **HVAC** Proposed Use: Proposed Project Description: install a Baxi 3.01 direct vent Boiler -natural gas 2 unit residential - install a Baxi 3.01 direct vent Boiler -natural gas Dept: Zoning Status: Approved with Conditions 01/09/2008 Reviewer: Jeanine Bourke **Approval Date:** Ok to Issue: Note: 1) This shall remain a 2-family home any change of use requires separate approvals Dept: Building Status: Approved with Conditions Reviewer: Jeanine Bourke **Approval Date:** 01/09/2008 Note: Ok to Issue: 1) The installation must comply with the State of Maine Gas Regulations.

YEAR 19 YEAR 19 720 CONSTRUCTION i sed 1/10 FOUNDATION FLOOR CONST PLUMBING CONCRETE TRIOL DOOM 210 BATHROOM CONCRETE BLOCK STEEL JOIST TOILET ROOM BRICK OR STONE MILL TYPE WATER CLOSET REIN. CONCRETE LAVATORY CELLAR AREA FULL FLOOR FINISH KITCHEN SINK B 1 2 3 1/2 STD. WAT. HEAT NO. CELLAR CEMENT AUTO, WAT, HEAT ! EXTERIOR WALLS ELECT. WAT. SYST. EARTH CLAPBOARDS PINE LAUNDRY TUBS COMPUTATIONS VV WIDE SIDING HARDWOOD NO PLUMBING DROP SIDING TERRAZZO 4270 NO SHEATHING TILE TILING S. F. BATH FL. & WCOT. WOOD SHINGLES TOILET FL. & WOOT. ASBES. SHINGLES LIGHTING STUCCO ON FRAME ATTIC FLR. & STAIRS ADDITIONS +1290 ELECTRIC STUCCO ON TILE INTERIOR FINISH NO LIGHTING BRICK VENEER NO. OF ROOMS BRICK ON TILE BASEMENT PINE вѕмт. 2ND SOLID BRICK HARDWOOD WALLS STONE VENEER PLASTER OCCUPANCY CONC. OR CIND. BL. UNFINISHED SINGLE FAMILY METAL CLG. TWO FAMILY FLOORS TERRA COTTA APARTMENT VITROLITE RECREAT, POOM STORE PLATE GLASS FINISHED ATTIC 2 PM FINISH THEATRE INSULATION FIREPLACE HOTEL WEATHERSTRIP HEATING OFFICES FIREPLACE ROOFING PIPELESS FÜRNACE WAREHOUSE HEATING ASPH. SHINGLES HOT AIR FURNACE COMM. GARAGE WOOD SHINGLES FORCED AIR FURN. GAS STATION ASBES. SHINGLES SLATE TILE HOT WAT. OR VAPOR ECONOMIC CLASS METAL NO HEATING OVER BUILT COMPOSITION UNDER BUILT GAS BURNER ROLL ROOFING DT 5-4-50 FACT. +10 OIL BURNER LD. 2 ск. 32 INSULATION STOKER REP. VAL SUMMARY O F BUILDINGS OCC.A TYPE GR. AGE REMOD. COND. REP. VAL. P. D. PHY. VAL. F. D. SOUND VAL. TAX VAL. 2S/FR 0 8010 Dw19 176 4410 В С С D E E G YEAR 1951 4410 1951 TOTAL BLDGS. X Y 19 19 19 TAX VAL 19 OLD VAL 19 CHANGE 19



## FILL IN AND SIGN WITH INK

## APPLICATION FOR PERMIT HEATING OR POWER EQUIPME

		HISSUEC	
	VAN	<sup>5</sup> 2003	
JT.	7.	A ser	

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 122 E 2	Use of Building $\frac{\partial}{\partial v}$ $v = 01/09/09$					
Name and address of owner of appliance	Leilson					
313 STEVEN	is Aug					
	CRESIDENTAL SERVICES					
Installer's name and address Tropics (1811)						
	Telephone (307) 799 -935 6					
Location of appliance:	Type of Chimney:					
☑ Basement □ Floor	☐ Masonry Lined					
☐ Attic ☐ Roof	Factory built					
Type of Fuel:	☐ Metal					
✓ Gas □ Oil □ Solid						
g das a on a sond	Factory Built U.L. Listing #					
Appliance Name: BAXI 3.01	Direct Vent					
U.L. Approved Yes \( \square\) No	Type RA-XI UL#					
O.E. Approved Tes C No	Type DATA ( UL#					
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank					
installation instructions? 🔀 Yes 🗆 No	Oil					
·	Gas					
IF NO Explain:	ريم الماري ا					
	Size of Tank					
	Size of Tunk					
The Type of License of Installer:	Number of Tanks					
☐ Master Plumber #						
□ Solid Fuel #	Distance from Tank to Center of Flame feet.					
风 Oil #						
▼ Gas # PUT 1741	Cost of Work: $\frac{5}{2}$ , $\frac{5}{2}$ , $\frac{5}{2}$					
□ Other	Permit Fee: \$					
<u>Approved</u>	Approved with Conditions					
Fire:	☐ See attached letter or requirement					
Ele.:						
Bldg.:	Inspector's Signature Date Approved					
Signature of Installer Mocky Haires						
Digitature of Installer						
White - Inspection Yellow - File	Pink - Applicant's Gold - Assessor's Copy					