					15 to-			
City of Portland, Maine	- Building or Use	Permi	t Application	Permit No:	Issue Date:		CBL:	
·5		Cel: (207) 874-8703, Fax: (207) 874-871				7-	125 B002001	
Location of Construction:	Owner Name:	<u> </u>			Owner Address:		Phone:	
452 Deering Ave	O'grady James	M Ww	ii Vet &	452 Deering Ave				
Business Name:	Contractor Name			Contractor Address:	2.5	10.01	Phone	
	Dead River Company			PO Box 467 Scarborough			2078839515	
Lessee/Buyer's Name	Phone:		1	Permit Type: HVAC				Zone: R-5
Past Use:	Proposed Use:		J	Permit Fee:	Cost of Work:	CEC	District:	1
Two family home		two family home w/new burnham		\$93.00 \$7,965.00 3  FIRE DEPT: Approved Use Group: Type  BOTH Mechanic		Type: Heat		
Proposed Project Description:				NA	B.	OIA.	Mech	enical
Install new Burnham Boiler			_	Signature	Sign		2	
				Acuon. Approx				Deniad
		***************************************		Signature:		Date	:	
Permit Taken By:	Date Applied For: 09/17/2004			Zoning	Approval			_
1 This permit application do	nes not preclude the	Spe	cial Zone or Review	s Zonii	ng Appeal	H	listoric Prese	ervation
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> </ol>		☐ Sh	oreland	☐ Variance ☐ Not in Dist		Not in District	t or Landmark	
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>		☐ Wetland ☐ Flund Zone ☐ Subdivision		Conditional U.S.		[ [	Does Not Require Review Requires Fleview	
						☐ F		
						Approved		
		Sit	e Plan	Approve	ed		Approved w/C	Conditions
		Ма	Minor MM	Denied			Denied	
		Date:		Date.		Date:		
I hereby certify that I am the over I have been authorized by the operation. In addition, if a pershall have the authority to entergate the authority to ent	wner to make this appli ermit for work described	med pro cation a d in the	as his authorized application is iss	proposed work is agent and I agree ued, I certify that	to conform to all the code official's	applic s autho	able laws o orized repre	of this esentative
such permit.								

ADDRESS

DATE

PHONE

SIGNATURE OF APPLICANT

<b>Location of Construction:</b>	Owner Name:	Owner Address:	Phone:	Phone:	
452 Deering Ave	O'grady James M Wwii	Vet & 452 Deering Ave			
Business Name:	Contractor Name:	Contractor Address:	Phone		
	Dead River Company	PO Box 467 Scarborough	20788395	.5	
Lessee/Buyer's Name	Phone:	Permit Type:		Zone:	
		HVAC			
Dept: Zoning	Status: Approved	Reviewer: Tammy Munson	Approval Date: 09	/29/2004	
Note:	**	Ž	Ok to Issu	e: 🗸	

**Reviewer:** Tammy Munson

**Approval Date:** 

Note: Ok to Issue: ✓

1) Installation shall comply with 1993 BOCA Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules

**Status:** Approved with Conditions

Dept:

Building

## **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 APPLICAN	ADDRESS	DATE	РНО
			_
RESPONSIBLE PERSON IN CHARGE OF WORK. TIT		DATE	PHO





## **APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT**

125	B	002

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 452 DEERING ST.	Use of Building RES. Date 9/104
Name and address of owner of appliance JAMES O GRADY  452 DEERING ST. PORTLAND,	ME 04103
Installer's name and address DEAD RIVER CO. 73 P	Telephone 883-9515
Location of appliance:  Basement	Type of Chimney:  Masonry Lined  Factory built
Type of Fuel:  Gas Gil Solid	☐ Metal
Appliance Name: BURNHAM V86 BUILER  U.L. Approved Yes \( \text{N} \) No	Factory Built U.L. Listing #  Direct Vent  Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes   No  IF NO Explain:	Type of Fuel Tank Oil Gas Size of Tank
The Type of License of Installer:	Number of Tanks
□ Master Plumber # □ Solid Fuel # Oil #	Distance from Tank to Center of Flame feet.  Cost of Work: \$ 7765.00  Permit Fee: \$ 93.00
Approved Fire:	Approved with Conditions  See attached letter or requirement
Signature of Installer White - Inspection Yellow - File I	Inspector's Signature Date Approved  D RIVER CO.  Pink - Applicant's Gold - Assessor's Copy



## CITY OF PORTLAND, MAINE

**Department of Building Inspections** 

erk 17 20 04
0
Received from Dead River
Location of Work 452 Nacing 94 STY Congress
Cost of Construction \$
Permit Fee \$ 2/3.00
Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)
Other HVAC 120,00
CBL: 21 E (28 . 93.00
Check #: 1314166 Total Collected \$ 213.00

## 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