

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-002	Issue Date: PERMIT ISSUED JAN 14 2005	128 E004001
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Location of Construction: 71 Woodford St	Owner Name: Wallace Rebecca N	Owner Address: 71 Woodford St	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R3

Past Use: Residential 2 unit	Proposed Use: Residential 2 unit: replacement of 138 gal oil tank	Permit Fee: \$39.00	Cost of Work: \$1,175.00	CEO District: 4
Proposed Project Description: Replacement of 138 gal oil tank		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: TANK	
		Signature:	Signature: <i>JMB</i> 1/13/05	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
		Signature:	Date:	

Permit Taken By: dmartin	Date Applied For: 01/06/2005	Zoning Approval	
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Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <i>OK</i> <input type="checkbox"/> Site Plan <i>OK</i> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>JMB</i> 1/13/05	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 checked="" type="checkbox"/> Not in District or Landmar <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: <i>JMB</i>
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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

City of Portland, Maine - Building or Use Permit

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

Permit No: 05-0021	Date Applied For: 01/03/2005	CBL: 128 E004001
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Location of Construction: 71 Woodford St	Owner Name: Wallace Rebecca N	Owner Address: 71 Woodfords St	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone (207) 883-95 15
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

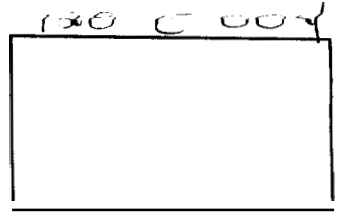
Proposed Use: Residential 2 unit: replacement of 138 gal oil tank	Proposed Project Description: Replacement of 138 gal oil tank
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Dept: Zoning	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 01/13/2005
Note:	Ok to Issue: <input checked="" type="checkbox"/>		

Dept: Building	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 01/13/2005
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Installation shall comply with 2003 International Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules			



FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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 71 WOODFORD ST. Use of Building RES Date 12/24/14
 Name and address of owner of appliance REBECCA WALLACE
71 WOODFORD ST. PORTLAND, ME 04103.
 Installer's name and address DEAD RIVER CO.
73 PLEASANT HILL ROAD SCARBOROUGH, ME Telephone (207) 883-9575

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

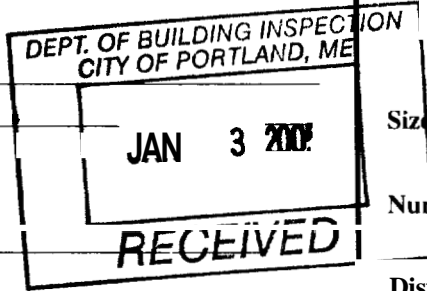
Appliance Name:

REPLACEMENT 5P OIL TANK

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 # MS 30008710
- Gas # _____
- Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
- Gas

Size of Tank 138 GALLON OIL TANK

Number of Tanks 1

Distance from Tank to Center of Flame 22 feet.

Cost of Work: \$ 1,175.00

Permit Fee: \$ 300

Approved

Fire: _____
 Ele.: _____
 Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer

[Signature] DEAD RIVER CO. SCARBOROUGH, ME 04070
 Date Approved 12/24/14

White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy

chk 1226708