

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 10-0887	Issue Date:	CBL: 129 1003001
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Location of Construction: 4 Bay View Dr	Owner Name: Dwyer Deborah J	Owner Address: 4 Bay View Dr	Phone:
Business Name:	Contractor Name: Main Gas	Contractor Address: 908 Roosevelt Trail Windham	Phone: 2078926744
Lessee/Buyer's Name	Phone:	Permit Type: Tanks - Commercial	Zone: R-3

Past Use: Single Family	Proposed Use: Sinmgle Family / Install 50 gallon gas tank.	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 4
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FIRE DEPT: Approved Denied
 INSPECTION: Use Group: U Type: U
 Signature: N/A Signature: State Gas Reg

Proposed Project Description:
Install 50 gallon gas tank.

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
 Action: Approved Approved w/Conditions Denied
 Signature: _____ Date: _____

Permit Taken By: gg	Date Applied For: 07/26/2010	Zoning Approval	
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan

Maj Minor MM

OK
 Date: 7/30/10 Agon

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Date: _____

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review
 Approved
 Approved w/Conditions
 Denied

Date: ABM

PERMIT ISSUED

AUG 17 2010

City of Portland

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

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Permit No: 10-0887	Date Applied For: 07/26/2010	CBL: 129 I003001
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Location of Construction: 4 Bay View Dr	Owner Name: Dwyer Deborah J	Owner Address: 4 Bay View Dr	Phone:
Business Name:	Contractor Name: Main Gas	Contractor Address: 908 Roosevelt Trail Windham	Phone (207) 892-6744
Lessee/Buyer's Name	Phone:	Permit Type: Tanks - Commercial	

Proposed Use: Sinmgle Family / Install 50 gallon gas tank.	Proposed Project Description: Install 50 gallon gas tank.
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 07/30/2010

Note: **Ok to Issue:** ✓

- 1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 08/17/2010

Note: **Ok to Issue:** ✓

- 1) The installation must comply with the State of Maine Gas Regulations.

PERMIT ISSUED

AUG 17 2010

City of Portland



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

July 26 2010

Received from David Mackey

Location of Work 4 Bayview Dr.

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 30.00

Building (1L) Plumbing (1S) _____ Electrical (1Z) _____ Site Plan (U2) _____

Other Tank

CBL: 129 E 003

Check #: visa Total Collected \$ 30.00

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

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



FILL IN AND SIGN WITH INK

PERMIT ISSUED

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

AUG 17 2010

129 City of Portland
1003

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 4 Bayview Dr. Use of Building RES. Date 07-26-2010

Name and address of owner of appliance JONAS & KELLEY ALLEN

Installer's name and address MANGAS 908 ROOSEVELT TRAIL
WINDHAM MAINE Telephone 852-6244

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: KITCHEN RANGE

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 # _____
- Gas # MANGAS
- Other _____

Type of Chimney:

Masonry Lined
Factory built N/A

Metal
Factory Built U.L. Listing # N/A

Direct Vent
Type N/A UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank 50 GAL

Number of Tanks 1

Distance from Tank to Center of Flame 25 feet.

Cost of Work: \$ 30.00

Permit Fee: \$ _____

Approved

Fire: _____

Ele.: _____

Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer MANGAS

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

Maingas (Branch #17)
Customer Site Plan

CUSTOMER NAME: JONES & Kelley Allen
STREET ADDRESS: 4 Bayview Drive
TOWN: Portland Maine 04103

New Account:	
Existing Account:	
Date:	<u>07-26-2010</u>
Phone #:	<u>207-686-6058</u>
Work #:	

DELIVERY INSTRUCTIONS:

Corner of Bayview and Cheney St

Appliance(s) being installed: (1) Type: Kitchen Range Btu's: _____ (2) Type: _____ Btu's: _____
(3) Type: _____ Btu's: _____ (4) Type: _____ Btu's: _____

Total System (Btu) load: _____ Btu's:

Tank/Regulator Information: Tank Size: Regulator(s): Twin 1st 2nd

Additional tank/reg. info.:

Piping Information: Type: _____ Size: _____ Quantity: _____

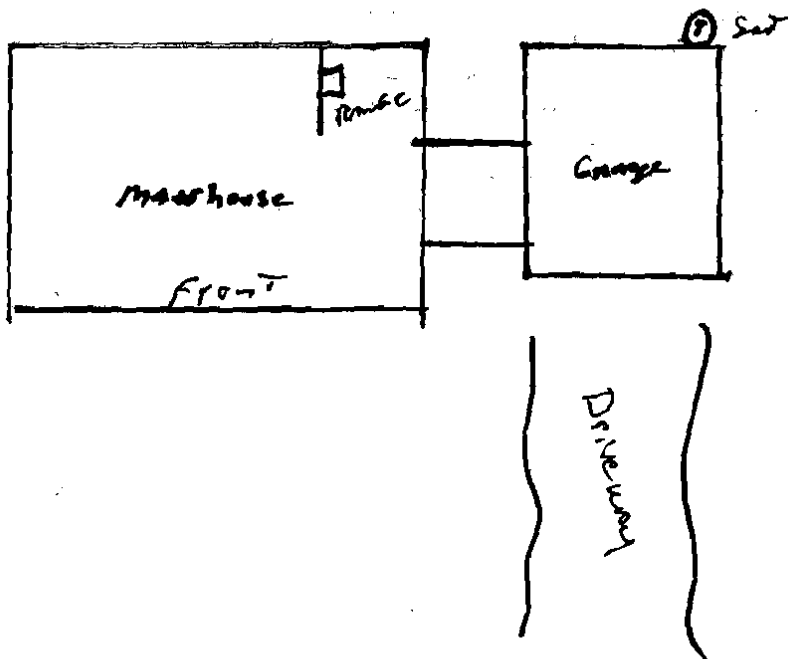
Additional piping information:

Parts/Fittings Information:

Special tools required:

VENTING

APPLIANCE
PARTS
TAX
LABOR



Additional Instructions/Comments:

Bayview Dr →