						<u> </u>	1. 37		PERN	AIT IS:	SHE	D		
City of Portland, N		0					1	7.0	Issue Date		7		T 00	001
389 Congress Street,	04101 Tel: (, Fax: ((207) 874	I-8716		05-12	70		1 ^	2005	131	L00	001
Location of Construction: Owner Name:					Owner A			SEP	19	2006	hone		ļ	
127 Pleasant Ave Abbott Lorrain						easant .								
Business Name: Contractor Name:					Contract	or Addi	ess:	CLTY Q	E ₂ POR	XTĽ		99558	5	
Lessee/Buyer's Name		Down East En	ergy			Permit T	vne.	erse	July Forma	mu		20 <i>TT</i>	79336 T	Zone:
Lessed Buyer's Name		I none.					- Dwe	llings	s					RS
Past Use:		Proposed Use:			_	Permit Fee: Cost of Work				rk:	: CEO District:			
Single Family Home Single Family gallon Propand		Home/ install a 57		7				30.00						
		e Gas ta	nk		FIRE D	EPT:		Approved Denied	Use Gro	_	v: 23		Type: TA A	
Proposed Project Description	on:										7		0.	~! !
install a 57 gallon Pro						Signatur	e:			Signatur	Signature MB 9/19/0			
	•					PEDESTRIAN ACTIVITIES DIS								
						Action: Approved Approved Approved				proved w/	oved w/Conditions Denied			
						Signatur	re:				Date:			_
Permit Taken By: Idobson		oplied For: 0/2005					Zon	ing	Approv	al				
			Sne	cial Zone or	r Revie	ws T		Zonine	g Anneal	 	Ki	storic	Prese	rvation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews Zoning Appea Shoreland Variance				Not in District or Landmar								
			│ □ w	etland	1	Miscellaneous		ieous	Does Not Require Review					
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 permit and stop all work			☐ Fle	ood Zone	1	.	Con	nditio	nal Use		R	equire	s Revi	ew
			Subdivision Interpretation			ition	Approved							
			Sit	te Plan			☐ App	proved	i		A	.pprov	ed w/C	Conditions
			Maj [Minor _] MM		_ Der	nied			\Box	enied	.)
			Date:	Mp.	7/19	105 C	Date:			Da	ite.	ÀΛ	ΛE	<u>メ</u>
			U		1	1							`	
					2 . mi	227								
I hereby certify that I ar I have been authorized I jurisdiction. In addition shall have the authority such permit.	by the owner to n, if a permit fo	make this appl or work describe	med pro ication a d in the	as his auth applicatio	that th orized on is is	e propo l agent a sued, I c	nd I ag certify t	ree to	o conform he code of	to all ap ficial's a	plica uthor	able l rized	aws o	of this esentative
SIGNATURE OF APPLICA	NT			AD	DRESS	1			DATE	2			PHON	IE
RESPONSIBLE PERSON II	V CHARGE OF W	OPK TITLE							DATE			_	PHON	



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

39 B 010	
PERMIT ISSUED	1
SEP 1 9 2005	
CITY OF PORTLAND	

accordance with the Laws of Maine, the Building Code of the						
Name and address of owner of appliance	HODOR 121 Precisant					
Installer's name and address Davin Fast, E	Telephone 799-5585					
Location of appliance:	Type of Chimney:					
□ Basement □ Floor □ Attic □ Roof	☐ Masonry Lined Factory built					
Type of Fuel: Gas Oil Solid	☐ Metal Factory Built U.L. Listing #					
Appliance Name:	Direct Vent Type UL#					
Will appliance be installed in accordance with the manufacture's installation instructions? Yes	Type of Fuel Tank Oil Gas Size of Tank Number of Tanks Distance from Tank to Center of Flame feet. Cost of Work: \$					
Approved Fire:	Approved with Conditions See attached letter or requirement					
Signature of Installer Jude	Inspector's Signature Date Approved					

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

		_ ()	(1)	<u>.</u>
	PERM	IT ISS	SUED	
	SEP	192	2005	
C	TY OF	POR	TLANI))

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

	The undersigned	d hereby app	lies for a peri	mit to install	the following	heating, co	oking or power	equipment in	n
accord	ance with the La	ws of Maine	, the Building	Code of the	City of Portla	nd, and the	following speci	ifications:	

Location / CBL 12 Contrict Use of Building Diverte Date 85 years Name and addressyof owner of appliance Location Alberta 127 Alexander Fortium of the state Location Location						
Installer's name and address	Telephone 199-5555					
Location of appliance: Basement Floor Roof Type of Fuel: Gas Oil Solid	Type of Chimney: Masonry Lined Factory built Metal Factory Built U.L. Listing #					
Appliance Name: U.L. Approved Yes No Will appliance be installed in accordance with the manufacture's installation instructions? No IF NO Explain: Master Plumber # Solid Fuel # Oil # Gas # Other	Direct Vent Type					
Approved Fire: Ele.: Bldg.: White - Inspection Yellow - File	Approved with Conditions See attached letter or requirement Inspector's Signature Date Approved Pink - Applicant's Gold - Assessor's Copy					