

City of Portland, Maine - Building or Use Permit Application

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

| | | |
|----------------------|------------------------------|--------------------|
| Permit No: 05-619 | PERMIT ISSUED NOV 17 2005 | BL: 151 D011001 |
|----------------------|------------------------------|--------------------|

| | | | |
|---|--------------------------------------|---|----------------------|
| Location of Construction: 67 UNIVERSITY ST | Owner Name: SUKEFORTH MATTHEW A | Owner Address: 67 UNIVERSITY ST | Phone: |
| Business Name: | Contractor Name: Down East Energy | Contractor Address: 172 Main Street South Portland | Phone: 207-995585 |
| Lessee/Buyer's Name | Phone: | Permit Type: HVAC | Zone: |

| | | | | |
|---------------------------|--|------------------------|--------------------------|--------------------|
| Past Use: Multi-Family | Proposed Use: Multi-Family- install a 120 gallon Tank | Permit Fee: \$30.00 | Cost of Work: \$30.00 | CEO District: 4 |
|---------------------------|--|------------------------|--------------------------|--------------------|

| | |
|--|---|
| FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied TO NPPA 58 | INSPECTION: Use Group: U Type: TA State Gas Regs Signature: <i>[Signature]</i> |
| Signature: <i>[Signature]</i> | Signature: <i>[Signature]</i> |
| PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied | |
| Signature: | Date: |

| | | |
|-----------------------------|---------------------------------|------------------------|
| Permit Taken By: Idobson | Date Applied For: 11/02/2005 | Zoning Approval |
|-----------------------------|---------------------------------|------------------------|

| | | | |
|--|---|---|---|
| 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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.. | Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan May <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: | 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 type="checkbox"/> Not in District or Landmark <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 late: |
| | <i>[Large Signature]</i> | | |

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: 05-1619 | Date Applied For: 11/02/2005 | CBL: 151 D011001 |
|------------------------------|--|----------------------------|

| | | | |
|--|---|---|---------------|
| Location of Construction: 67 UNIVERSITY ST | Owner Name: SUKEFORTH MATTHEW A | Owner Address: 67 UNIVERSITY ST | Phone: |
|--|---|---|---------------|

| | | | |
|-----------------------|---|--|---------------------------------|
| Business Name: | Contractor Name: Down East Energy | Contractor Address: 172 Main Street South Portland | Phone: (207) 799-5585 |
|-----------------------|---|--|---------------------------------|

| | | |
|----------------------------|---------------|-----------------------------|
| Lessee/Buyer's Name | Phone: | Permit Type: HVAC |
|----------------------------|---------------|-----------------------------|

| | |
|---|---|
| Proposed Use: Multi-Family- install a 120 gallon Tank | Proposed Project Description: install a 120 gallon Tank |
|---|---|

Dept: Zoning **Status:** Not Applicable **Reviewer:** T a m y Munson **Approval Date:** 11/16/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** T a m y Munson **Approval Date:** 11/16/2005
Note: **Ok to Issue:**

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

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 11/07/2005
Note: **Ok to Issue:**

1) To comply with NFPA 58.

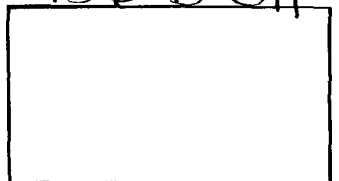


37mm

FILL IN AND SIGN WITH INK

150 B 011

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 _____ Use of Building APT. Date 11/2/05
 Name and address of owner of appliance Joe Mgorian 87
University Ave Portland
 Installer's name and address Dan East Energy
177 Main St Portland Telephone 799-5555

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name:

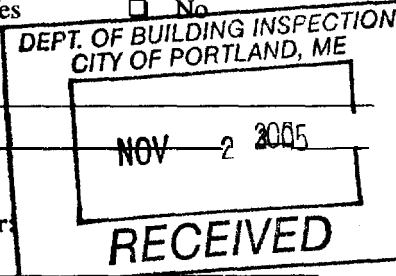
U.L. Approved Yes No

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 # PVT 1445
- 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 120

Number of Tanks 3

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ N/A

Permit Fee: \$ _____

Approved

Approved with Conditions

Fire: _____

Ele.: _____

Bldg.: _____

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer

MATT SUCK FORTH

| | | | |
|-----------------------|----------|--------------------|----------|
| DAY OF INSTALL | | APPOINTMENT | |
| DATE | 11/30/09 | DATE | 10/20/06 |
| TIME | | TIME | 8:00 |
| | | SALES REP | RSA |

PROPANE INSTALLATION FORM

| | | | |
|------------------------------|-------------------|----------------------|---------|
| NAME: | JOE MCGONIGAL | ACCOUNT# | |
| ADDRESS: | 57 MAACKWORTH ST | PHONE# | |
| DIRECTIONS: | PORTLAND ME 04103 | | 7497388 |
| 67 UNIVERSITY - ST. PORTLAND | | OIL CUSTOMER? | |
| QUOTE: (Y/N) | | LABOR: | |
| | | (PART: | |

JOB DESCRIPTION

WORKORDER#(S) _____ **TICKETS** _____

| | | | | | | | | | | | | |
|-------------------------|------------------------------------|-----------------|-----|--------------|---------------------------|----------------|-------------|-----------------------|-------------|--------------------|---------------------------|--|
| TANK SIZE | | | | | TRENCHREQ | | | | | TRENCHDUGBY | | |
| HOT WORK | INST | UNIT: | | | | SHOP | | REQUIRE | | CONVERSION | | |
| | HOOK | | | | | CUST | | | | | | |
| WALK SAFE | INSTALL LOCATION | | | KITCH | LVRM | BDRM | BATH | GAR | BASE | OTHER | | |
| ** UNSAFE COND. | ASBESTOS | CONFINED | | WATER | | ANIMALS | | ELECTRIC WIRES | | OTHER * | | |
| ELECTRIC GRD. | DESCRIPTION: | | | | | | | | | | | |
| CRAWL SPACE * | | | | | | | | | | | | |
| LADDER WRK * | | | | | | | | | | | | |
| REMOVAL REQUIRED | TOTAL BTU LOAD | | | | FURTHEST APPLIANCE | | | | | | | |
| PIPE SIZE | 3/8 | 112 | 5/8 | 1/2BI | 3/4BI | 1BI | TRAC | | | PLASTIC | | |
| VENTING REQUIRED | NOTES: ** (SIDING/TILE/ETC) | | | | | | | | | | | |
| PARTS/EQUIPMENT: | | | | | | | | | | | DISCUSSED W/ CUST: | |
| | | | | | | | | | | | SPECIAL TOOLS: | |
| | | | | | | | | | | | #TECHS | |



CITY OF PORTLAND, MAINE

Department of Building Inspections

_____ 20 05

Received from Green Earth Energy

Location of Work 67 University Ave.

Cost of Construction \$ _____

Permit Fee \$ 30

Building (IL) ___ Plumbing (I5) ___ Electrical (I2) ___ Site Plan (U2) ___

Other HVAC

CBL: 151 DOH

Check #: CC

Total Collected \$ 30

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