389 Congress Street, 04101	0	Permit Application 8, Fax: (207) 874-871			157	A004001	
Location of Construction:	Owner Name:		Owner Address:		Phone:		
69 GEORGE ST	KANTZ JAN	ET K	61 INVERNESS	ST			
Business Name: Contractor Name		2:	Contractor Address:		Phone	Phone	
	Derosier Plum	bing & Heating	27 Ray Street Bio	ddeford	20759	04749	
Lessee/Buyer's Name	Phone:		Permit Type: HVAC			Zone:	
Past Use:	Proposed Use:		Permit Fee:	Cost of Work	: CEO Distric		
Single Family Home connecte	'	Home - New Buderus	Termiteree.	\$12,46			
permit#070547		oil burner w/ 275	FIRE DEPT:	<del></del>	INSPECTION: Use Group: R3	Type: <b>5</b> ß	
					TRC Signature: Jm	2003	
Proposed Project Description: Riello oil burner w/ 275 Gallo	n ail tank in basamant		6.	}	s . 1	3/4-100	
Kieno on ourner w/ 2/3 Gano	ii on tank iii basement		Signature: PEDESTRIAN ACT	IVITIES DIST	RICT (P.A.D.)	<u> 8/15/07</u>	
			j		roved w/Conditions	Denied	
			Signature:		Date:		
Permit Taken By:	Date Applied For:	<del></del>	Zoning Approval				
ldobson	08/13/2007						
1. This permit application do	oes not preclude the	Special Zone or Revie	vs Zoning Appeal		Historic	Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	: 'Variand	· Variance		Not in District or Landma	
2. Building permits do not in septic or electrical work.	nclude plumbing,	Wetland	Miscell	Miscellaneous		Does Not Require Review	
3. Building permits are void within six (6) months of the	he date of issuance.	Flood Zone	Conditi	ional Use	Requires	Review	
False information may invoce permit and stop all work.		Subdivision	; ; Interpre	etation	Approve	d	
PERMIT IS	SUED	Site Plan	Approv	red	Approve	d w/Conditions	
15		Maj Minor MM	Denied		Denied	. Denied	
CITY OF PO	TOTION	Date: 2 8/15/	Date:	Date:		8/15/07	
I hereby certify that I am the ov I have been authorized by the of jurisdiction. In addition, if a possibility to enter shall have the authority to enter such permit.	wner of record of the national control of the national	ication as his authorized in the application is is	ne proposed work in displayment and I agree assued, I certify that	to conform the code offi	o all applicable la icial's authorized	iws of this representative	
SIGNATURE OF APPLICANT		ADDRES		DATE		PHONE	
	GE OF WORK, TITLE			DATE		PHONE	





## APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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	15		114	)	The same of the same of

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

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 69 George 54.	Use of Building Residetial Date 7/26/07
Name and address of owner of appliance <u>Janet Kar</u> 69 George St. Portland Me	04101
Installer's name and address Guy Derosicr Bidleford Me 04005	Plb offing Inc. 27 Ray St.  Telephone 283-6401  Cell # 590-4749
Location of appliance:	Type of Chimney:
Basement	Factory built built on site by Mason
Type of Fuel: ☐ Gas	☐ Metal
Appliance Name: Bulerus	Factory Built U.L. Listing #
U.L. Approved \( \text{Yes \( \text{Y} \) No \\ \( \text{Riello} \) oil burner is \( \text{V.L. Approved} \)	Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes   No	Type of Fuel Tank  ☑ Oil □ Gas
IF NO Explain:	Size of Tank 275 ga/
The Type of License of Installer:	Number of Tanks
<ul> <li>✓ Master Plumber # M S 8 166</li> <li>✓ Solid Fuel #</li> <li>✓ Oil # M S 3000 724 3</li> </ul>	Distance from Tank to Center of Flame feet.
☐ Gas #	Cost of Work: \$ 12467.00  Permit Fee: \$ 50 80
Approved	Approved with Conditions
Fire: Ele.:	☐ See attached letter or requirement
Bldg.:	Inspector's Signature Date Approved
Signature of Installer	

PLU	MBING A	APPLICATION	NC	•		Division of Health Engineering			
<u> </u>	PROPERTY	ADDRESS							
Town or Plantation			2007-5197						
Street Subdivision Lot	Street Subdivision Lot #			PORTLAND PERMIT # 10349 TOWN COPY					
P	ROPERTY C	WNERS NAME		Date   ¬	0 1	1			
		· •		Permit ssued:	<u> </u>	FEE Charged			
_Last:		First:	-	Local Plumbing Inspector Si	gnature	L.P.I.# 0,7,3,2			
Applicant Name:	6.	e			·				
Mailing Address of Owner/Applicant		e e e e e e e e e e e e e e e e e e e			157-A-004				
(If Different)		liaant Statement		Cal	ution: Inches	tion Required			
I certify that th		licant Statement mitted is correct to the b	est of my			prized above and found it to be in			
	d understand that a pectors to deny a P	any falsification is reaso Permit.	on for the Local	compliance with the	Maine Plumbing	Rules.			
<u> 15</u>			<u>7⁄2-</u>	·					
S	ignature of Owner	/Applicant	Dat	e Local Plumbing I	nspector Signature	Date Approv			
			PERM	IT INFORMATION					
This Applica	ation is for	Тур	e of Struct	ure To Be Served:	Plum	nbing To Be Installed By:			
1. 🗹 NEW PI	LUMBING	1. Z SINGLE	FAMILY DW	ELLING	1. ☑ MAST	ER PLUMBER			
2. 🗆 RELOC	ATED	2. 🗆 MO	ODULAR OF	R MOBILE HOME	2. 🗆 OIL BU	JRNERMAN			
PLUMB	ING	3. 🗆 MULTIPL	E FAMILY D	WELLING	3. 🗆 MFG'[	3.   MFG'D. HOUSING DEALER/MECHANIC			
		4.  OTHER -	- SPECIFY		4.   PUBLIC UTILITY EMPLOYEE				
						ERTY OWNER			
·					LICENSE	<u> </u>			
	& Piping Reloca mum of 1 Hook-U		Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture			
		·	7	Hosebibb / Sillcock		Bathtub (and Shower)			
tho-	OK-UP: to public se cases where not regulated and	the connection	100	Floor Drain		Shower (Separate)			
the	local Sanitary D	_				Sink			
	O	$\mathbf{R}$		Urinal		SIIIK			
HO was	<u>OK-UP:</u> to an ex stewater disposa	kisting subsurface		Drinking Fountain	13	Wash Basin			
			DEP1	Indirect Waste  OF BUILDING INSPECTION	الخبيا	Water Closet (Toilet)			
line	PING RELOCATI s, drains, and pi v fixtures.		c,	Water Treatment Sottener Filter, etc		Clothes Washer			
				Grease / Oil Separator		Dish Washer			
				Dental Cuspidor		Garbage Disposal			
Y .	O]	R		Figure (		Laundry Tub			
				Other:		Water Heater			
	TR/	ANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1			
	X		<b>Y</b>		<b>&gt;</b>	Fixtures (Subtotal)			
		SEE PER	MT FEE,S	CHEDULE ING FEE	17	Column 2 Total Fixtures			
	, , ,	FOR C	ACCULATI	ING FEE		Fixture Fee			
			- //			Transfer Fee			
L		<u>-</u>		<del> </del>	<b>&gt;</b>	Hook-Up & Relocation Fee			
Page 1 of	1				1.17	Permit Fee			

HHE-211 Rev. 6;94

## **ELECTRICAL PERMIT City of Portland, Me.**

To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date	7-20-0	7
Permit #	07-454	
CBL#	157 A 00	$ \sqrt{I} $

LOCATION: 69 GEORGE St.	METER MAKE & #	0DE#
CMP ACCOUNT # 3 ~ 229 - 583	OWNER	
TENANT	PHONE #	

						TOTA	L EACH	FEE
OUTLETS	49	Receptacles	24	Switches	7	Smoke Detector	.20	D 14.00
	L		,					
FIXTURES	26	Incandescent		Fluorescent		Strips	.20	5.20
SERVICES	-	Overhead	,	Underground		TTL AMPS 200 <800	15.00	
<u> </u>		Overhead		Underground		>800	25.00	
		Overnead		Onderground		>000	25.00	
Temporary Service		Overhead		Underground		TTL AMPS	25.00	
	1						25.00	
METERS	i	(number of)					1.00	1
MOTORS		(number of)					2.00	<b>'</b>
RESID/COM		Electric units					1.00	
HEATING		oil/gas units		Interior		Exterior	5.00	
APPLIANCES	1	Ranges	_	Cook Tops		Wall Ovens	2.00	200
		Insta-Hot		Water heaters	•	Fans	2.00	
<del>-</del>	1	Dryers		Disposals	1	Dishwasher	2.00	400
		Compactors		Spa	1	Washing Machine	2.00	200
		Others (denote)		_			2.00	
MISC. (number of)		Air Cond/win		=			3.00	
		Air Cond/cent				Pools	10.00	
		HVAC		EMS		Thermostat	5.00	
		Signs					10.00	
		Alarms/res			DE	PT OF BUILDING IL SPECTION	5.00	
		Alarms/com		-		PT. OF BUILDING IL SPLOHON CITY OF PORTLAND, ME	15.00	
		Heavy Duty(CRKT)					2.00	
		Circus/Carnv				IIII 2 0 0007	25.00	
		Alterations				JUL 2 n 2007	5.00	
		Fire Repairs					15.00	
		E Lights				RECEIVED	1.00	
		E Generators				1 the Charl V hashed	20.00	
PANELS		Service		Remote	- ;	Main	4.00	400
TRANSFORMER		0-25 Kva		пенние		- Iviaiii	5.00	400
THAIRDI ORIVIER		25-200 Kva					8.00	
		Over 200 Kva					10.00	
						TOTAL AMOUNT DUE	10.00	
		MINIMUM FEE/CO	MME	RCIAL SS OO		MINIMUM FEE 45.00	7-7-	
			IAIIAIC	NOIAL 33.00		WINNING 45.00		

CONTRACTORS NAME LESSARD + SONS	Electric	_MASTER LIC. #	MS 600 17383
ADDRESS 173 TEMPLE AUC		_ LIMITED LIC. #	
TELEPHONE 467-0642			LV 1
n/ .		1	110

White Copy - Office

SIGNATURE OF CONTRACTOR

Yellow Copy - Applicant