Location of Construction:	Owner Name:		05-1038 Owner Address:	Phone:			
254 CLIFTON ST			254 CLIFTON ST				
Business Name:	Contractor Name	. 	Contractor Addresses				
	Down East En		172 Main Street South Portle	HAN D ₂₀₇₇ 95585			
Lessee/Buyer's Name	Phone:		Permit Type: Zo				
		J	Tanks - Dwellings				
Past Use:	Proposed Use:		Permit Fee: Cost of Work: CEO District:				
_		Home/ add a 120	\$30.00 \$200.00 4				
		tank j	FIRE DEPT: Approved INSPECTION: Use Group Type O				
Proposed Project Description	n:		10 / P	Ofart Cas			
add a 120 gallon Propar			Signature	Signature:			
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
			Action: Approved Approved w/Conditions De				
			Signature:	Date:			
Permit Taken By:	Date Applied For:	Zoning Approval					
ldobson	07/25/2005						
	tion does not preclude the	Special Zone or Review		Historic Preservation			
Applicant(s) from r Federal Rules.	neeting applicable State and	Shoreland	Variance	Not in District or Landmark			
2. Building permits do septic or electrical	o not include plumbing, work.	Wetland	Miscellaneous	Does Not Require Review			
	e void if work is not started hs of the date of issuance.	☐ Flood Zone	Conditional Use	Requires Review			
` /	nay invalidate a building	Subdivision	Interpretation	Approved			
permit and stop all	work	l \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>				
	work	Site Plan	Approved	Approved w/Conditions			
	work	☐ Site Plan Maj ☐ Mindr ☐ MM ☐	☐ Approved ☐ Denied	Approved w/Conditions Denied			
	work	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
	work	Maj _ Mind _ MM _	Denied	Denied / /5			
	work	Maj _ Mind _ MM _	Denied Date:	Denied / /5			

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

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPME

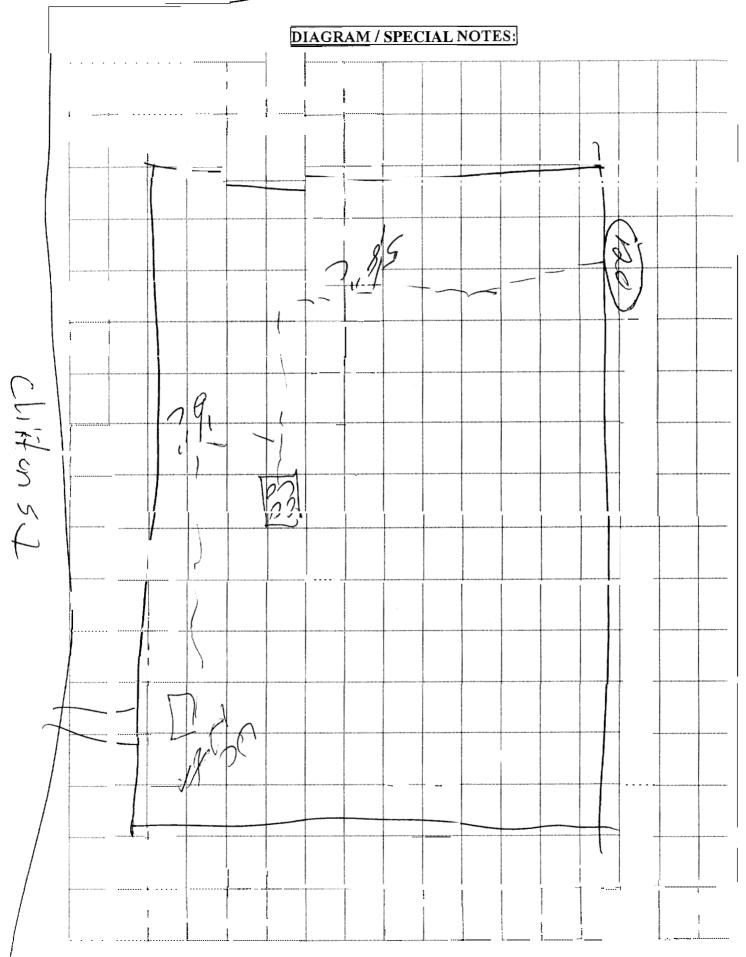
PERMIT ISSUED							
		AUG - 9 1842					
TI							
CITY OF PORTLAND							

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

Name and address of owner of appliance	Use of Building Policite Date 7/25/6.
Installer's name and address journ Last	Telephone 199-55
Location of appliance: Basement Floor Attic Roof	Type of Chimney: Masonry Lined Factory built
Type of Fuel: Gas Oil Solid	☐ Metal Factory Built U.L. Listing #
Appliance Name: U.L. Approved Yes No	_ Direct Vent TypeUL#
Will appliance be installed in accordance with the manufacture's installation instructions? ☐ Yes ☐ No IF NO Explain:	Type of Fuel Tank Gas
The Type of License of Installer:	Size of Tank Number of Tanks
☐ Master Plumber # ☐ Solid Fuel # ☐ Oil # ☐ Gas# ☐ Other	Distance from Tank to Center of Flame feet. Cost of Work: \$ C C Permit Fee: \$ (C)
Approved Fire:	Approved with Conditions See attached letter or requirement
Signature of Installer White - Inspection Yellow - File	Inspector's Signature Date Approved Pink - Applicant's Gold - Assessor's Copy

DAY OF INS	TALL				AP	POINTME	NT			
DATE			<u>DA</u>	DATE TIME						
TIME					SAI	LES REP	5	tour		
		PANE I	LATIC	ATION FORM						
NAME: (har Foeh)						<u>A</u>	CCOUNT#	119	305	
ADDRESS:	25	4	0/18	BON	21		PHONE#	17/	-2658	
DIRECTIONS	<u>:</u>		del	<u>/</u>						
							660	2		
						OII	CUSTOM	ED?		
QUOTE: (Y/I	<u> </u>	T	ABOR:			PAR		EIV:		
QUOTE. (1/1	· · · · · · · · · · · · · · · · · · ·		ADOK.							
			JOB 1	DESCR	IPTIO	N	Gre	But	1600	
WORKORDI	ER#(S)			-		TICKETS	_		Culles	
				1/			_			
	HO	1200	014							
TANK SIZE	120		TRENC	CH REQ			TRENCH DI			
HOT WORK	HOOK	UNIT:	11 K 1	500	15/1	me -	SHOP CUST		QUIRE VERSION	
WALK /	INSTALL		тсн	LVRM	BDRM	BATH		BASE	OTHER	
SAFE ** UNSAFE	LOCATION	CON	IEINIED	WAT	ED J	- ANIMALS	ELECT		OTHER	
COND.	ASBESTOS		FINED	7 WAI	EK	ANIMALS	WIR		*	
GRD. グ	DESCRIPTION	<u>UN:</u> Si	ZL,	160	1200	100	· ; [] 9	1 K	10	
CRAWL SPACE *	5///	p	7	16	100.					
LADDER WRK *	/8		10	_3 50		•				
REMOVAL REQUIRED	TOTAL BTU	LOAD			FURTHI	EST APPLIA	NCE			
	/8 1/2	5/8	1/2BI	3/4BI	1BI	TRAC		PLAST	TC	
	ν	1/								
VENTING REQUIRED					NOTES	** (SIDING	/TILE/ETC)		[` ر	
PARTS/EQUIP	MENT:									
					DISC	W/	JST:			
					DISC	**/	<u>/51.</u>			
				SPECIAL TOOLS:						
								#TF	CHS	

beorge



City of Portland, Ma 389 Congress Street, 04		O		Permit No: 05-1038	Date Applied For: 0712512005	CBL: 157 BOO8001		
ocation of Construction:		Owner Name:	ļ	Owner Address:	Phone:			
254 CLIFTON ST FOEHL GHARLES A & SARA W				254 CLIFTON ST				
Business Name:	Contractor Name:			Contractor Address:	Phone			
		Down East Energy		172 Main Street So	(207) 799-5585			
Jessee/Buyer's Name		Phone:		Permit Type:		•		
				Tanks - Dwellings				
Dept: Zoning	Status: A	Approved	Reviewer:	Tammy Munson	Approval D	vate: 08/09/2005		
Note:						Okto Issue: 🗹		
Dept: Building Note:	Status: A	approved with Condition	ns Reviewer:	Tammy Munson	Approval D	ok to Issue:		
1) The tank must NOT b	e subject to	vehicular traffic.						

