

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 06-0629	Issue Date: <b>PERMIT ISSUED</b> MAY 19 2006	CBL: 159 C012001
-----------------------	--	---------------------

<b>Location of Construction:</b> 21 ROSEDALE ST	<b>Owner Name:</b> KATZ DANIELE & SASHA ROSE	<b>Owner Address:</b> 21 ROSEDALE ST	<b>Phone:</b>
	<b>Contractor Name:</b> Down East Energy	<b>Contractor Address:</b> 172 Main Street, South Portland	<b>Phone:</b> 2077995585
	<b>Phone:</b>	<b>Permit Type:</b>	<b>Zone:</b>

<b>Proposed Use:</b> Single Family set 1 gas tank 57 gal	<b>Permit Fee:</b> \$30.00	<b>Cost of Work:</b> \$30.00	<b>CEO District:</b> 4
	<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> TO NEPA 58		<b>INSPECTION:</b> Use Group: U Type: Tank State Gas Reg Signature:
<b>Proposed Project Description:</b> Set 1 gas tank 57 gal	<b>'EDESTRIAN ACTIVITIES DISTRICT' (P.A.D.)</b> Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied Signature: Date:		

<b>Permit Taken By:</b> dmartin	<b>Date Applied For:</b> 05/02/2006	<b>Zoning Approval</b>		
<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>		<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 5/12/06	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <input checked="" 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 Date: 5/12/06

**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.

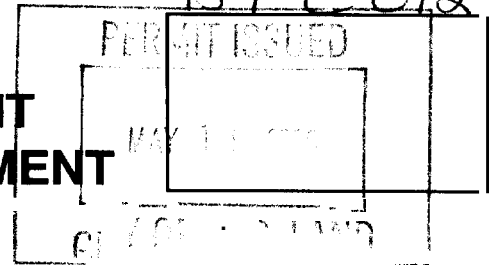
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

SK



FILL IN AND SIGN WITH INK

# 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 21 Rosedale Use of Building Private Date 4/27/06  
 Name and address of owner of appliance Susby Rose 21 Rosedale Rd  
Portland  
 Installer's name and address Plus Fast Services  
172 Main St S. Portland Telephone 799-5585

**Location of appliance:**

- Basement  Floor
- Attic  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 # PNT 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 57

Number of Tanks 1

Distance from Tank to Center of Flame \_\_\_\_\_ feet.

Cost of Work: \$ \_\_\_\_\_

Permit Fee: \$ 30

**Approved**

Fire: \_\_\_\_\_  
 Ele.: \_\_\_\_\_  
 Bldg.: \_\_\_\_\_

**Approved with Conditions**

See attached letter or requirement

Signature of Installer [Signature] Inspector's Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

21 Rose Pale

