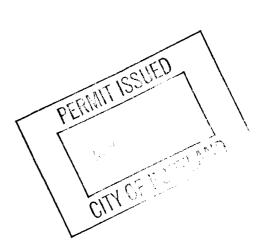
City of Portland, Ma	ine - Building or Use	Permit Application Po	ermit No:   Issue Date;	SS CBL:
389 Congress Street, 04	101 Tel: (207) 874-8703	, Fax: (207) 874-8716	06-1553	139 D022001
Location of Construction:	Owner Name:	Own	er Address:	Phone:
466 OCEAN AVE BILLINGS RO		OBERT E & BETTY PO	BOX 334	
Business Name:	Contractor Name		ractor Address:	Phone
	Down East En		Main Street South Portlan	d 2077995 <b>5</b> 85
Lessee/Buyer's Name	Phone:		nit Type: VAC	Zone: -3
Past Use:	Dropoged Uga		nit Fee: Cost of Work:	CEO District:
Past Use: Proposed Use: Single Family Single Family			\$30.00 \$30	
Single Lummy	Single 1 anniy		a name	INSPECTION:
			Approved	Use Group: V Type: fand
			) Penied	0 1900
				State Gas
Proposed Project Description:			$\mathcal{N}//7$	
120 gal tank		Sign	ature:	Signature:
		PED	ESTRIAN ACTIVITIES DISTI	RICT (P.A.P)
		Action	on: Approved Appro	oved w/Conditions Denied
		Sign	ature:	Date:
Permit Taken By:	Date Applied For:		Zoning Approval	
dmartin	10/24/2006			
1. This permit application	on does not preclude the	Special Zone or Reviews	Zoning Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.  2. Building permits do not include plumbing, septic or electrical work.		Shoreland Cemzin	☐ Variance	Not in District or Landmark
		Wetland Camily	Miscellaneous	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		Flood Zone	Conditional Use	Requires Review
		Subdivision	Interpretation	Approved
		Site Plan	Approved	Approved w/Conditions
		Maj Minor MM	Denied	Denied
		Date: 10/2 4 0	Date:	Date:
		( ' (		
		OEDTIELO ATLON		
I handby a autifu that I was th		CERTIFICATION		al C 1 Lal a
		med property, or that the pro ication as his authorized agei		by the owner of record and that
				cial's authorized representative
				on of the code(s) applicable to
SIGNATURE OF APPLICANT		ADDRESS	DATE	PHONE

•	-		ilding or Use Permit (207) 874-8703, Fax: (2	Permit No: 06-1553	<b>Date Applied For:</b> 10/24/2006	CBL: 159 D022001	
Location of Construction:  466 OCEAN AVE  Owner Name:  BILLINGS ROBERT			17	Owner Address: PO BOX 334		Phone:	
Business Nam	e:		Contractor Name:	C	Contractor Address:		Phone
			Down East Energy		172 Main Street So	outh Portland	(207) 799-5585
Lessee/Buyer's Name Phone:		Phone:	'hone:		Permit Type: HVAC		
Proposed Use	:			Proposed	Project Description:	<del></del>	<del></del>
	uily 120 gal  t			120 ga			
Dept: Zo	oning	Status:	Approved	Reviewer:	Marge Schmucka	l Approval D	<b>Oate:</b> 10/24/2006 <b>Ok to Issue:</b> ✓
Dept: Bu Note:  1) The ins	-		Approved with Conditions th the State of Maine Gas l		Tammy Munson	Approval D	Oate: 11/01/2006  Ok to Issue: ✓
2) The tan	k must not b	e subject to	vehicular traffic.				





## APPLICATION FOR PERMIT HEATING OR POWER EQUIPMEN

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		-	<del></del>	

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 Jointe Date
Name and address of owner of appliance	Billings 466 Crain Que
Installer's name and address	
	Telephone
Location of appliance:	Type of Chimney:
☐ Basement ☐ Floor	☐ Masonry Lined
☐ Attic ☐ Roof	Factory built
Type of Fuel:	☐ Metal
☐ Gas ☐ Oil ☐ Solid	Factory Built U.L. Listing #
Appliance Name:	☐ Direct Vent
U.L. Approved \( \square\) Yes \( \square\) No	Type UL#
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank
installation instructions?	□ Ojl
	☐ Gas
IF NO Explain:	Size of Tank
	1
The Type of License of Installer:	Number of Tanks
Master Plumber #	
Solid Fuel #	Distance from Tank to Center of Flame feet.
Oil #	Cost of Work: \$ 30,00
Other	
- Outer	Permit Fee: \$
DEFT. OF DIFF. Approved CHON	Approved with Conditions
Fire	☐ See attached letter or requirement
Ele.: harry a gang	
Bldg.:	Towards of Comments
RECEIVED	Inspector's Signature Date Approved
Signature of Installer Just	the
	n

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

66

