Citer of Developed Ma		Doumit A pullication	Permit No:	PERMIT IS	SUED	
• •	aine - Building or Use I 4101 Tel: (207) 874-8703,		02-13		2002 161 F009001	
Location of Construction:	Owner Name:	0	wner Address:		Thone	
958 Washington Ave	Harbaugh Betty	Harbaugh Betty Ann		WIT AVE OF POF	TLAND	
Business Name:	Contractor Name:	C	ontractor Add	ressi	11L/1ph/	
	Dead River Co	mpany I	PO Box 467	Scarborough	2078839515	
Lessee/Buyer's Name	Phone:		ermit Type: HVAC		Zone:	
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:	
single family	-	install 275 gallon	FIRE DEPT:	\$0.0	0 2 SPECTION: BOCA Mechanniel	
Proposed Project Description:	:	······································	/ `	2	1993	
install 275 gallon oil tank	k		Signature: EDESTRIAN	I	gnature: 9	
			Action: 🗌 A	Approved Approve	ed w/Conditions Denied	
			Signature:		Date:	
Permit Taken By: Date Applied For: tmm 12/12/2002			Zoning Approval			
	ion does not preclude the neeting applicable State and	Special Zone or Review		Zoning Appeal	Historic Preservation	
Federal Rules.						
2. Building permits do not include plumbing, septic or electrical work.		U Wetland		iscellaneous	Does Not Require Review	
<ol> <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>		Flood Zone Subdivision	Conditional Use		Requires Free Rew	
		Site Plan		pproved	Approved w/Conditions	
		Maj 🗌 Minor 🗌 MM [		enied	Denied	
		Date:	Date:		Date:	

## 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

FILL IN AND	SIGN WITH INK
APPLICATION HEATING OR PO	N FOR PERMIT WER EQUIPMENT
To the INSPECTOR OF BUILDINGS, PORTLAND, ME. The undersigned hereby applies for a permit to inst accordance with the Laws of Maine, the Building Code of t	
Location / CBL	Use of Building RES. Date 12/9/02
Name and address of owner of appliance BETTY HARBAU	GH
958 WASHINGTON	AVE
Installer's name and address RIVER CO	
73 PLEASANT HUL RD.	Telephone 883-9575
SCARBOROUGH, ME.	
Location of appliance:	Type of Chimney:
Basement D Floor	Masonry Lined
Attic Roof	Factory built
Type of Fuel:	□ Metal
Gas D Oil D Solid	Factory Built U.L. Listing #
	Factory Built U.L. Listing #
Appliance Name:	Direct Vent
U.L. Approved 🖸 Yes 🖬 No	Type UL#
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank
installation instructions? 2 Yes D No	Oil
	Gas Gas
IF NO Explain:	
	Size of Tank 275 GAUSH
The Type of License of Installer:	Number of Tanks
	Distance from Tank to Center of Flame feet.
Solid Fuel # Oil #	Distance from Tank to Center of Flame feet.
Gas #	Cost of Work: \$
• Other	Barrelt France
	Permit Fee: \$
· · ·	
Approved	Approved with Conditions
Fire:	See attached letter or requirement
Ele.:	
Bldg.:	Inspector's Signature Date Approved
Bidg.: Signature of Installer August G	tany Jer. Manger
	•
White - Inspection Yellow - File	Pink - Applicant's Gold - Assessor's Copy

nments:			App	proval Date	12/12/2002	
L			Glv	en On Date		
OK to Issue Permit	Name	Tommy Munson	Date	12/12/2002	Date 2	
Conditions Section:		Add New Condition From	Add New C	ondition	Delete Condition	
nstallation shall comply with 1 ows and Rules	993 BOCA	Mechanical Code c	and State of Mai	ine Oil and S	blid Fuel Board	

Opened system.



## CITY OF PORTLAND, MAINE

**Department of Building Inspections** 

Dec: 9 202
Received from Dand Reven Co.
Location of Work 958 Washengton
Cost of Construction \$
Permit Fee \$
Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)
Other
CBL: 161 FOR
Check #:Total Collected s_200

## 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