| Proposed Use: single family Proposed Project Description: replacing a 225 gal oil tank Permit Taken By: gg Date Applied For: gg O6/10/2004 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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. Proposed Use: single family replacing a 225 gal oil Approved INSPECTION: Use Group: Ty BUAC Approved INSPECTION: Use Group: Ty BUAC Approved Approved Approved Approved Approved Approved Approved Not in District or Special Zone or Reviews Shoreland Variance Not in District or Wetland Miscellaneous Does Not Requires Review Approved Approved Conditional Use Requires Review Approved Conditional Use Approved Approved Approved Approved Approved Approved Approved App | |
|--|----------------|
| 43 Anson Rd Business Name: Contractor Name: Dead River Company Dome Po Box 467 Scarborough Dome Dom | 01 |
| Business Name: Contractor Name: Dead River Company PO Box 467 Scarborough 20788395 15 | |
| Business Name: Dead River Company | |
| Proposed Project Description: replacing a 225 gal oil tank Permit Taken By: gg Date Applied For: Approved O6/10/2004 Permit Taken By: Beliading permits application does not proclude the Applicant(s) from meeting applicable State and Federal Rules. Buliding 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. Proposed Use: single family replacing a 225 gal oil tank Signature: Permit Type: HVAC Past Use: Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved Approved Not in District or Permit Type: HVAC Past Use: Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved Not in District or Permit Type: HVAC INSPECTION: Use Group: Ty Bull Approved Not in District or Not in District or Plood Zone Miscellaneous Does Not Requires Review Wetland Wiscellaneous Does Not Approved Wetland Wiscellaneous Does Not Requires Review Wetland Wiscellaneous Does Not Approved Wetland Wet | |
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| Proposed Froject Description: replacing a 225 gal oil tank Proposed Project Description: replacing a 225 gal oil tank Signature: Signature: Signature: Proposed Project Description: replacing a 225 gal oil tank Signature: Signature: Signature: Proposed Project Description: replacing a 225 gal oil tank Signature: Signature: Proposed Project Description: replacing a 225 gal oil tank Signature: Signature: Proposed Project Description: Approved Approved Approved w/Conditions Description: Approved Special Zone or Reviews Shoreland Variance Not in District or Project Project Shoreland Miscellaneous Does Not Requires Review within six (6) months of the date of issuance. Filod Zone Interpretation Approved Approved | one: 2-3 |
| single family single family replacing a 225 gal oil tank Proposed Project Description: | |
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| septic or electrical work. 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 Conditional Use Requires Review Interpretation Approved Approved | Landmarr |
| 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 Gonditional Use | Review |
| False information may invalidate a building permit and stop all work | |
| | |
| Site Plan Approved Approved Denied | htions |
| Maj Mnor MM Denied | 4 |
| Date: Date: >ate: | |
| 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 a | nd that |

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 |
|------------------------|---------|------|-------|
| | | | |

| City of Portland, Maine - Building or Use Permit Permit No: Date Applied For: CBL: | | | | | | | |
|--|---|-----------------------|----------------------|-------------------|-----------------|--|--|
| 389 Congress Street, 0 | 4101 Tel: (207) 874-8703, Fax: (207) | 207) 874-871 <u>6</u> | 04-0778 | 06/10/2004 | 188 B024001 | | |
| Location of Construction: | Owner Name: | 0 | Owner Address: | • | Phone: | | |
| 43 Anson Rd | Hooper Ellen M | 4 | 43 Anson Rd | | | | |
| Business Name: | Contractor Name: | C | Contractor Address: | | Phone | | |
| | Dead River Company | I | PO Box 467 Scarb | (207) 883-9515 | | | |
| Lessee/Buyer's Name | Phone: | P | ermit Type: | | • | | |
| | | | HVAC | | | | |
| Proposed Use: | | Proposed | Project Description: | | | | |
| single family replacing a 225 gal oil tank replacing a 225 gal oil tank | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Dept: Zoning | Status: Approved | Reviewer: | Tammy Munson | Approval D | ate: 06/15/2004 | | |
| Note: | | | | | Ok to Issue: | | |
| | | | | | | | |
| | | | | | | | |
| Dept: Building | Status: Approved with Conditions | Reviewer: | Tammy Munson | Approval D | ate: 06/15/2004 | | |
| Note: | | | | | Ok to Issue: | | |
| 1) Installation shall cor | nply with 1993 BOCA Mechanical Co | de and State of N | Maine Oil and Soli | d Fuel Board Laws | and Rules | | |
| 1 | | | | | | | |

| City of Portland, N | Maine - Buildin | g or Use Permit | ţ | Permit No: | Date Applied For: | CBL: |
|--|------------------------|------------------------------------|--------------|----------------------------------|-------------------|-----------------------------------|
| 389 Congress Street, | 04101 Tel: (207) | 874-8703, Fax: (| 207) 874-871 | 6 ⁰⁴⁻⁰⁷⁷⁸ | 06/10/2004 | 188 B024001 |
| ocation of Construction: | Owi | ner Name: | | Owner Address: | | Phone: |
| 43 Anson Rd | Но | oper Ellen M | | 43 Anson Rd | | |
| Business Name: | Con | tractor Name: | | Contractor Address: | | Phone |
| | De | ad River Company | | PO Box 467 Scarb | orough | (207) 883-9515 |
| .essee/Buyer's Name | Pho | ne: | | Permit Type: HVAC | | |
| 'roposed Use: | <u> </u> | | Propos | ed Project Description: | | |
| single family replacing | a 225 gal oil tank | | replac | ing a 225 gal oil tan | ık | |
| Dept: Zoning Note: | Status: Appro | ved | Reviewer | : Tammy Munson | Approval D | ate: 06/15/2004 Ok to Issue: ✓ |
| Dept: Building Note: 1) Installation shall co | | oved with Condition | | Tammy Munson Maine Oil and Soli | Approval D | Ok to Issue: 🗹 |
| 1 -, | r-j 1//01/01 | 1.10011111111111111111111111111111 | | | | |





APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMITISSUED

MIT

PMENT

JUN 18 2004

CATY OF PORTILAND

01203383

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

| | The ι | ındersi | gned he | ereby ap | pliesf | or a per | mit to i | install | thefoll | owing | heating | , cooking | gorpov | ver e | quipment | in |
|--------|-------------|---------|---------|----------|--------|----------|----------|---------|---------|--------|---------|-----------|---------|--------|----------|----|
| accord | lance v | with th | e Laws | of Main | e, the | Building | Code | of the | City of | Portla | nd, and | the follo | wing si | pecifi | cations: | |

| Location / CBL 43 ANSON RD | Use of Building Date 6/10/04 |
|---|---|
| Name and address of owner of appliance GEOGE Hoop | DER // |
| 43 ANSON | RD PORTUND, ME |
| Installer's name and address DEAD RIVER W | 73 PHENSOND HILL RD |
| SCARBOROUGH / | Telephone 803-95/5 |
| Location of appliance: | Type of Chimney: |
| Basement O Floor | Masonry Lined |
| ☐ Attic O Roof | Factory built |
| Type of Fuel: | O Metal |
| Gas Gil Solid | 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 installation instructions? Yes No IF NO Explain: The Type of License of Installer: Master Plumber # Solid Fuel # Oil # O Gas# O Other | Type of Fuel Tank Dil Gas Sue of Tank OIL TANK Number of Tanks Distance from Tank to Center of Flame Cost of Work: \$ 1355.00 Permit Fee: \$ 39.00 |
| Approved Fire: | Approved with Conditions ☐ See attached letter or requirement |
| Bldg.: Signature of Installer | Inspector's Signature Date Approved District Control of the Approved Date Approved |
| White - Inspection Yellow - File | Pink - Applicant's Gold - Assessor's Copy |





FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMITISSUED

188 B 624

JUN 18 2004

| | d Comment of the Comm | TY OF PORTLAND |
|--|--|-------------------|
| To the INSPECTOR OF BUILDINGS, PORTLAND, ME. The undersigned hereby applies for a permit to accordance with the Laws of Maine, the Building Code | | |
| Location / CBL 45 AMSON RD | Use of Building | Data 10/10/04 |
| Name and address of owner of appliance OFTHER ITS | | Date Office |
| LIZ HUSON | ob Matiano we | |
| Installer's name and address TEAD RIVER CO | 73 DIFASANT HILL | <u>RD</u> |
| CARRAROUGH | Telephone So | 75/5 |
| Location of appliance: | Type of Chimney: | |
| Basement | Masonry Lined | |
| ☐ Attic ☐ Roof | Factory built | |
| Type of Fuel: | ☐ Metal | |
| ☐ Gas ☐ Oil ☐ Solid | Factory Built U.L. Listing # | |
| Appliance Name: | | |
| U.L. Approved 'Yes 'No | — ☐ Direct Vent Type uI | # |
| endinapproved di les di lite | til. | лт |
| Will appliance be installed in accordance with the manufacture's | Type of Fuel Tank | |
| installation instructions? Yes | Oil | |
| | ☐ Gas | |
| IF NO Explain: | - 125 NE | DINEWENT |
| | Size of Tank 925 RE | OU TANK |
| The Type of License of Installer: | Number of Tanks | Affirm 1 1 11 Con |
| ☐ Master Plumber # | Number of Tanks | |
| □ Solid Fuel # | Distance from Tank to Center of Flame | feet. |
| □ Oil # | Cost of Work: \$ \displays 35, \% 00 | |
| O Gas# | | |
| Other | Permit Fee: \$ | |
| <u>Approved</u> | Approved with Cond | tions |
| Fire: | See attached letter or requ | |
| Ele.: | | |
| Bldg.: | | |
| <u> </u> | Inspector's Signature | Date Approved |

Signature of Installer

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

Date Approved



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

| PERMITISSUED | |
|--------------|--|
| JUN 18 2004 | |

CITY OF PORTLAND

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 & Maine, the Building Code of the City & Portland, and the following specifications:

| Location / CBL | Use of Building Date |
|--|---|
| Name and address of owner of appliance | |
| 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 □ Yes □ No | Type uL# |
| Will appliance be installed in accordance with the manufacture's | Type of Fuel Tank |
| installation instructions? | □ Oil |
| | ☐ Gas |
| IF NO Explain: | |
| | Size of Tank |
| The Type of License of Installer: | Number of Tanks |
| ☐ Master Plumber # | |
| Solid Fuel # | Distance from Tank to Center of Flame feet. |
| ☐ Oil # | |
| ☐ Gas# | Cost of Work: \$ |
| ☐ Other | Permit Fee: \$ |
| Approved | Approved with Conditions |
| Approved | |
| Fire: | ☐ See attached letter or requirement |
| Ele.: | |
| Bldg.: | Inspector's Signature Date Approved |
| Signature of Installer | |

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy 1.