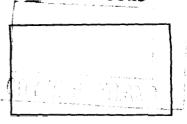
			Permit No:	Issue Date:	ISSUEPL:	
City of Portland, Mai	- C				191 B039001	
389 Congress Street, 041 Location of Construction:	Owner Name:	6, Fax: (207) 874-871	Owner Address:	 	Phone:	
52 WILLOW LN	ERIN ASSOC	IATES LLC	13 ACORN LN		Though.	
Business Name:	Contractor Name		Contractor Address:	MIN COL	Phone Phone	
Ouality Insulat		tion Inc.	65 Downeast Dri	しょしし しょうごうし	2078467745	
Lessee/Buyer's Name	Phone:		Permit Type:		Zone:	
			HVAC		IRS	
Past Use:	Use: Proposed Use:			Cost of Work	CEO District:	
Single Family Home		Single Family Home/ install a		\$2,103	5.00 3	
	lennox direct v	vent fireplace			_	
					Type: HAZ	
					(10.	
D			-	ļ	_	
Proposed Project Description:			Signature.		Signature AMB 2/2/06	
			PEDESTKIAN ACTIVITIES DISTRIC		CT (P.A.D.	
					roved w/Conditions Denied	
D 1: T 1 D	D (A 11 LE	1	Signature:		Date:	
Permit Taken By: ldobson	Date Applied For: 01/20/2006		Zoning			
Idobson	0112012000	Special Zone or Review	ews Zoni	ng Appeal	Historic Preservation	
		Shoreland	☐ Variano	ee	Not in District or Landman	
		Shoretaine			T	
		Wetland	Miscell	aneous	Does Not Require Review	
		Flood Zone	Conditional Use		Requires Review	
		Subdivision	Interpretation		Approved	
		Site Plan	Approv	ed	Approved w/Conditions	
		Maj Minor MM	Denied		Denied	
		Data N. 12 2/2	OG Date:		Date:	
					V	
		CERTIFICATI	ION			
I have been authorized by turisdiction. In addition, if	he owner to make this appl a permit for work describe	ication as his authorize d in the application is i	d agent and I agree ssued, I certify that	to conform to the code offi	by the owner of record and that o all applicable laws of this icial's authorized representative icion of the code(s) applicable to	
SIGNATURE OF APPLICANT		ADDRES	S	DATE	PHONE	
RESPONSIBLE PERSON IN CE	LADGE OF WORK TITLE			DATE	PHONE	

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

7	The under	rsigned he	ereby appl	lies for a p	ermit to in	stall the	following	heating,	cooking d	orpower	equipment	in
accordai	nce with	the Laws	of Maine,	the Buildi	ng Code o	f the City	y of Portla	nd, and	the follow	ing specij	fications:	

Name and address of owner of appliance CANCITE COWST.	Use of Building Louis Date 1/20/06
Installer's name and address QUALITY INSULATION IN	Telephone 846-7745
Location of appliance: Basement O Attic Roof	Type of Chimney: Masonry Lined Factory built LENNEX PIPE METAL
Type of Fuel: Gas O Oil O Solid	Metal Factory Built U.L. Listing #
Appliance Name: LENNOX DIRECT UENT FREPACE U.L. Approved Yes I No	Direct Vent Type METAL uL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes \(\sigma\) No	Type of Fuel Tank Oil Gas
IF NO Explain:	Size of Tank 170 SAC.
The Type of License of Installer:	Number of Tanks
Master Plumber # O Solid Fuel #	Distance from Touls to Contour of Flores
O Oil #	Distance from Tank to Center of Flame feet.
XI Gas # PNT 4272	Cost of Work: $\frac{2105.50}{480/00}$
☐ Other	Permit Fee: \$ \(\frac{18}{\text{0}} \)
Approved	Approved with Conditions
Fire:	See attached letter or requirement
Ele.:	
Signature of Installer Lease (Included)	Inspector's Signature Date Approved
White - Inspection Yellow - File Pi	nk - Applicant's Gold - Assessor's Copy

City of Portland, Maine - Building or Use Permit 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716				Permit No: 06-0099	Date Applied For: 01/20/2006	CBL: 191 B039001		
Location of Construction:	Owner Name:			wner Address:	Phone:			
52 WILLOW LN	ERIN ASSOCIATES LLC			13 ACORN LN				
Business Name:	Contractor Name:		C	ontractor Address:	Phone			
	Ouality Insulation Inc.		6	65 Downeast Drive Yarmouth		(207) 846-7745		
Lessee/Buyer's Name	Phone:		P	Permit Type:				
				HVAC				
Proposed Use: Propos				sed Project Description:				
Single Family Home/ install a lennox direct vent fireplace install			all a lennox direct vent fireplace					
	_							
Single Family Home/ install a lennox of	direct vent fireplace	inst	all a	lennox direct ven	t fireplace			