

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 04-1539.	Issue Date: 10/27/2004	CBL: 192 K065001
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Location of Construction: 3 Colonial Ct	Owner Name: Malia Peter D & Joanne L Jts	Owner Address: 3 Colonial Ct	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: 2078839515
Lessee/Buyer's Name	Phone:	Permit Type: HVAC TANK	Zone: R3

Past Use: Single family home	Proposed Use: single family home w/new 275 gallon oil tank	Permit Fee: \$39.00	Cost of Work: \$1,375.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: Tank	

Proposed Project Description:
install new 275 gallon oil tank in single family home

Signature: _____ Signature: *AMB 10/27/04*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: dmm	Date Applied For: 10/13/2004	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan <i>OK</i></p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>10/27/03 AMB</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>AMB</i></p>
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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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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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 3 COLONIAL COURT Use of Building _____ Date 10/14
 Name and address of owner of appliance PETER MAHA
192 K 6 S 3 COLONIAL COURT - PORTLAND, ME 04103
 Installer's name and address DEAD RIVER CO. 73 PLEASANT HILL ROAD - SCARBOROUGH, ME 04070
 Telephone _____

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 manufacturer's installation instructions? Yes No

IF NO Explain: _____

The Type of License of Installer:

- Master Plumber # _____
 Solid Fuel # _____
 Oil # MS 3000 8710
 Gas # _____
 Other _____

Type of Chimney:

- Masonry Lined
 Factory built _____

- Metal
 Factory Built U.L. Listing # _____

- Direct Vent
 Type _____

Type of Fuel Tank

- Oil
 Gas

Size of Tank 275 GALLON

Number of Tanks 1

Distance from Tank to Center of Flame 40 feet.

Cost of Work: \$ 1,375.00

Permit Fee: \$ 39.00



Approved

Approved with Conditions

Fire: _____

- See attached letter or requirement

Ele.: _____

Bldg.: JMB

Inspector's Signature _____

Date Approved _____

Signature of Installer _____

David Clutterbuck - DEAD RIVER CO.

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy